

Report 13-  
Sanitary

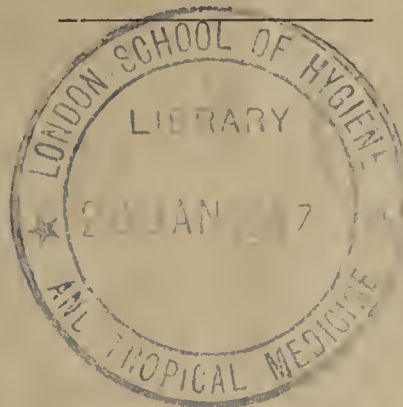
NO. 44.

MINISTRY OF THE INTERIOR, EGYPT.

THE WELLCOME INSTITUTE  
OF SCIENTIFIC RESEARCH

Ac. II

DEPARTMENT OF PUBLIC HEALTH.



ANNUAL  
STATISTICAL REPORT  
FOR  
1914.

CAIRO.  
GOVERNMENT PRESS.

To be obtained, either directly or through any Bookseller,  
from the GOVERNMENT PRESS, Bulâq; or from the SALE-ROOM, Old Ismailia Palace,  
Sharia Qasr el Aini.

1916.

PRICE P.T. 15.



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DEPARTMENT OF PUBLIC HEALTH.

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*With the compliments  
of the Director General  
Department of Public Health*

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MINISTRY OF THE INTERIOR, EGYPT.

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DEPARTMENT OF PUBLIC HEALTH.

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ANNUAL STATISTICAL REPORT FOR 1914.

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INTRODUCTORY NOTE.

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This Report is intended as a brief record of the work carried out by the various Sections of the Department during 1914. The work of the Ophthalmic Section forms the subject of a special report, and from time to time the same system is adopted in regard to investigations and researches carried out by the Hygienic Institute.

During the year some important changes have taken place. The Lunacy Section has been transferred to the Ministry of the Interior as a separate Department, and the Veterinary Section, with certain reservations, has been transferred to the Ministry of Agriculture.

The Ophthalmic Section has been strengthened by an increase of two Inspecting Surgeons and two new ophthalmic hospitals.

The Bacteriological and Chemical Laboratories of the Hygienic Institutes Section have been extended and improved by the addition of more rooms, apparatus, and staff, to meet the growing need for laboratory work.

A campaign against ankylostomiasis on an extensive scale has been inaugurated and is being pushed forward on scientific lines. The funds for the campaign are jointly supplied by the International Health Commission of the Rockefeller Trust and the Egyptian Government. The results obtained under this heading will form the subject of special reports.

With a view to the hygienic control of the water supplies in Egypt, a special Water Service has been formed and placed in charge of the Director of the Hygienic Institute with the collaboration of the Chief Engineer of the Municipalities and Local Commissions Section of the Ministry of the Interior. This Service will undertake the regular inspection of public water supplies and is intended to include all supplies, whether in the hands of the Government, companies, or private individuals.

The Central Medical Commission has been reorganized and a permanent President and Vice-President appointed. These changes were necessary owing to the increased

number of medical examinations to be carried out. The new arrangement enables the Commission to deal systematically with all cases coming before it and to give more time and attention to the work than was formerly possible.

After the war broke out it was necessary to temporarily diminish the European staff of the Department, as several Inspectors (Officers of the Royal Army Medical Corps, and others) were required for military work. A further diminution was necessary in respect to Germans and Austrians who held posts in the Department.

D. SEMPLE,

*Director-General.*

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I.—REPORT ON SECTION I.

1.—BIRKAS.

The following is a list of *birkas* belonging to the Government which have been filled in by private individuals in accordance with the arrangements of the Government Lands Department.

The law for dealing with private *birkas* was promulgated on July 11, 1914, Law No. 5.

TABLE I.—LIST OF GOVERNMENT *Birkas* FILLED IN BY PRIVATE INDIVIDUALS.

MUDIRIA.	Number of <i>Birkas</i> filled in.	TOTAL AREA.			
		Feddâns.	Qirâts.	Sahms.	Square Metres.
Beheira ... ..	17	1	21	5	7,911·25
Gharbîa ... ..	12	1	10	17	6,074
Menufia ... ..	7*	5	8	—	22,400
Daqahlia ... ..	5*	7	22	21	33,403·13
Sharqia ... ..	1	—	4	7	751
Qaliubia ... ..	1	—	19	8	3,383·25
Giza ... ..	2	—	6	20	1,196
Fayûm ... ..	1	1	8	20	4,746
Beni Suef ... ..	7	4	5	6	17,718·75
Minia ... ..	6	1	14	22	6,810·50
Qena ... ..	3	—	17	8	3,033·25
TOTAL ... ..	62				

2.—SANITATION OF MOSQUES.

There has been a considerable increase in the amount of work performed in connection with the sanitation of mosques. It has been necessary to close a certain number of the water systems as the proprietors would not put them into proper repair in compliance with the Decree which came into full operative force on July 1, 1913.

The following table is a statement of the work done :—

TABLE II.

WORK DONE.	Cairo.	Provinces.	Total.
Ablutionary systems of private mosques newly constructed and opened for use ... ..	1	24	25
Ablutionary systems of Waqfs mosques repaired and opened for use ... ..	3	5	8
Ablutionary systems of old mosques requiring repairs :—			
Number opened for use after repair... ..	1	130	131
„ closed for want of repairs ... ..	2	229	231
Number under repair, the delay allotted not having yet expired ... ..	9	281	290

\* One of which filled in by the Provincial Council.



3.—CEMETERIES.

The work done in connection with cemeteries is shown in the following tables:—

TABLE III.

PROVINCE OR GOVERNORATE.	CEMETERIES.			OLD CEMETERIES.		
	Established.	Enlarged.	Roads for Cemeteries.	Authorized.	Portion Condemned.	Condemned.
Cairo Governorate ... ..	—	—	—	—	—	—
Beheira Province ... ..	1	—	1	10	10	1
Gharbía .. ...	1	1	1	1	—	3
Daqahlia .. ...	1	—	—	5	2	2
Sharqia .. ...	3	2	1	—	—	4
Menufia .. ...	1	4	—	8	—	1
Qaliubia .. ...	2	1	—	—	1	—
Giza .. ...	1	—	—	—	—	—
Fayûm .. ...	—	—	—	—	—	—
Beni Suef .. ...	—	—	—	—	—	—
Minia .. ...	1	1	1	1	—	—
Assiût .. ...	1	1	1	1	—	—
Girga .. ...	1	—	—	—	—	—
Aswân .. ...	2	—	—	1	—	20
TOTAL ... ..	15	10	5	27	13	31

TABLE IV.—CEMETERIES DELIMITED AT THE EXPENSE OF THE DEPARTMENT.

MUDIRIA.	MARKAZ.	Number of Cemeteries.	Number of Posts.	COST.	
				L.E.	M.
Beheira ... ..	Kôm Hamâda ... ..	1	7	—	—
	Delingat ... ..	5	40	—	—
	TOTAL ... ..	6	47	42	300
Daqahlia ... ..	Simbellawein ... ..	3	39	—	—
	Agha ... ..	3	31	—	—
	Mit Ghamr ... ..	2	19	—	—
	TOTAL ... ..	8	89	77	430
Menufia ... ..	Ashmûn ... ..	2	24	—	—
	Menûf ... ..	1	15	—	—
	Tala ... ..	2	10	—	—
	Quesna ... ..	1	14	—	—
	TOTAL ... ..	6	63	54	495
GRAND TOTAL ... ..		20	191	174	225

TABLE V.—CEMETERIES DELIMITED AT THE EXPENSE OF INHABITANTS.

MUDIRIA.	MARKAZ.	Number of Cemeteries.	Number of Posts.	Cost.	
				L.E.	M.
Gharbîa ... ..	Tanta... ..	1	9	4	921
	Santa... ..	1	4	2	446
	Borollos ... ..	1	12	5	792
	TOTAL ... ..	3	25	13	159
Qaliubîa ... ..	Benha ... ..	1	4	2	000
	Tûkh ... ..	1	14	6	230
	TOTAL ... ..	2	18	8	230
Beheira ... ..	Etiai ... ..	1	4	2	556
	Damanhûr ... ..	1	15	7	622
	TOTAL ... ..	2	19	10	178
Sharqîa ... ..	Zagazig ... ..	3	34	16	808
	Mîna el Qamh ... ..	1	4	2	321
	Faqûs ... ..	1	4	3	083
	TOTAL ... ..	5	42	22	212
Menufia ... ..	Menûf ... ..	2	5	3	697
Beni Suef ... ..	Beni Suef... ..	1	4	3	326
	GENERAL TOTAL ... ..	16	118	60	802

The Decree defining the boundaries of the five large Mohammedan cemeteries of Cairo lying below the Moqattam Hills has not yet been promulgated.

4.—UNHEALTHY, INCONVENIENT, AND DANGEROUS ESTABLISHMENTS.

The following table gives details of the applications made in 1914 for licences for establishments falling under Class I of the Law of August 28, 1904 :—

TABLE VI.

NATURE OF ESTABLISHMENT.	Approved.	Refused.	Abandoned.*	Under Consi- deration.†	TOTAL.
Aerated water factories ... ..	7	8	4	1	20
Public baths ... ..	6	—	1	4	11
Fish <i>halaqas</i> ... ..	5	1	2	—	8
Oil presses ... ..	3	—	1	—	4
Sweetmeat factories ... ..	2	—	1	2	5
Soap factories ... ..	1	—	1	2	4
Artificial butter factories ... ..	1	2	—	—	3
Macaroni factories ... ..	2	—	—	1	3
Ice factories ... ..	1	1	—	—	2
Dairies ... ..	4	1	—	—	5
Coffee mill... ..	1	—	—	—	1
Laundry ... ..	1	—	—	—	1
Mineral acid factories ... ..	5	—	1	1	7
Cattle cake manufactory ... ..	—	—	—	1	1
Food markets ... ..	1	1	—	1	3
Cotton-ginning factories ... ..	11	—	2	5	18
Tanneries ... ..	1	—	—	1	2
Rice-husking establishments ... ..	4	2	—	1	7
Plaster and <i>homra</i> mill ... ..	1	—	—	—	1
Sugar cane crushing mills ... ..	2	—	—	—	2
Tobacco factory ... ..	1	—	—	—	1
Petroleum refinery ... ..	1	—	—	—	1
Manure depot ... ..	1	—	—	—	1
Public and cattle markets ... ..	24	15	6	8	53
Indiarubber factory ... ..	1	—	—	—	1
TOTAL ... ..	87	31	19	28	165

\* Abandoned because the applicants were unable or did not wish to carry out the conditions imposed.  
† In abeyance because their owners have not yet completed the plans.

*Ministerial Arrêtés.*—The draft *arrêtés* laying down additional conditions for establishments possessing permits under the Law of August 28, 1904 (Etablissements Insalubres, Incommodes, et Dangereux) were dealt with as follows :—

TABLE VII.

NATURE OF ESTABLISHMENT.	Approved.	Not Approved.	Under Conside- ration.	TOTAL.
<i>Alexandria :—</i>				
Public stables ... ..	199	—	6	205
Oil factory ... ..	1	—	—	1
Oil shops ... ..	2	—	—	2
Cattle sheds ... ..	38	—	—	38
Grocers' shops ... ..	4	—	2	6
Public bakeries ... ..	12	—	—	12
<i>Fessikh</i> store ... ..	1	—	—	1
Public cookshops ... ..	4	—	—	4
Butchers' shops ... ..	2	—	—	2
Pastry and confectionery shops ... ..	2	—	—	2
Fresh fish shop ... ..	1	—	—	1
Tannery ... ..	1	—	—	1
Aerated water factory ... ..	—	—	1	1
TOTAL ... ..	267	—	9	276
Bath (Cairo) ... ..	1	—	—	1
Stables (Cairo) ... ..	2	—	—	2
Oil press (Damietta) ... ..	1	—	—	1
Pottery works (Sharqia) ... ..	1	—	—	1
Confectioner's shop (Daqahlia) ... ..	1	—	—	1
Grocery store (Fayûm) ... ..	1	—	—	1
Sugar cane factory (Assiût) ... ..	1	—	—	1
Lime kiln (Assiût) ... ..	—	—	1	1
TOTAL ... ..	8	—	1	9

## 5.—ABATTOIRS.

No new *abattoirs* were established in the country during 1914.

*Slaughtering Sites.*—Sites for the slaughter of animals for food in villages where no *abattoirs* exist were approved in the following eleven villages :—

Embâba, Kombosh, Mahallet el Labbân, Shellal, El Korroor, Baltîm, Shubra el Maimûn, El Dalgamûn, Melîg, Mersa Matrûh, and Minia el Het (Fayûm).

The site suggested for Fisha el Soghra village was not approved.

A site for Zankalûn village is under consideration. For two villages, El Badamas and Bulâq Dakrûr, existing *abattoirs* in the vicinity were declared to be the official slaughtering sites.



6.—DEPOTOIRS.

Sites for the deposition of sewage materials, *abattoir* refuse, street sweepings, etc., were approved for Mahalla el Kobra and Zifta.

7.—MEDICO-LEGAL REPORTS.

The number of medico-legal reports performed unfortunately shows a tendency to increase rather than to diminish.

TABLE VIII.

LOCALITY.	SLIGHT.		SERIOUS.		FATAL.		TOTAL.	
	Accident.	Criminal.	Accident.	Criminal.	Accident.	Criminal.	Accident.	Criminal.
<i>Governorates :—</i>								
Cairo ... ..	76	12,141	444	55	384	34	904	12,230
Alexandria... ..	186	4,085	71	56	130	44	387	4,185
Port Said ... ..	91	355	5	—	23	3	119	358
Suez ... ..	5	107	2	2	14	1	21	110
Damietta ... ..	33	187	8	4	16	6	57	197
Ismailia ... ..	21	187	8	8	21	1	50	196
LOWER EGYPT.								
<i>Provinces :—</i>								
Qaliubia ... ..	166	831	134	100	160	40	460	971
Sharqia ... ..	367	1,421	135	116	250	59	752	1,596
Gharbia ... ..	620	3,685	322	149	641	84	1,583	3,918
Daqahlia ... ..	355	2,119	181	58	224	78	760	2,255
Menufia ... ..	377	2,300	270	128	276	84	923	2,512
Beheira ... ..	314	2,296	190	164	280	49	784	2,509
UPPER EGYPT.								
<i>Provinces :—</i>								
Giza ... ..	147	998	109	117	224	24	480	1,139
Fayûm ... ..	150	883	111	69	107	39	368	991
Beni Suef ... ..	114	1,647	77	92	109	40	300	1,779
Minia ... ..	234	1,891	220	173	232	93	686	2,157
Assiût ... ..	351	2,241	281	195	278	114	910	2,550
Girga ... ..	197	2,002	133	395	392	75	722	2,472
Qena ... ..	131	1,241	163	119	337	48	631	1,408
Aswân... ..	80	402	38	44	87	11	205	457
TOTAL ... ..	4,015	41,019	2,902	2,014	4,185	927	11,102	43,990

The following table shows the *arrêtés* issued and published in the *Journal Officiel* by the Department of Public Health in the following localities where a Municipal or Local Commission exists:—

TABLE IX.

<i>Arrêtés</i> for Preventing the Pollution of Drinking Water.	<i>Arrêtés</i> for Cleaning of Streets.
Râs el Bar.	Cairo (application of Article 3 of the <i>Arrêtés</i> to more streets).
Itâi el Barûd.	Benha and Kafr Manaqer (modification).
Fûa.	
Sherbîn.	
Santa.	
Samanûd.	
Desûq.	
Baltîm el Borollos.	
Beni Suef.	

The Department has also approved *arrêtés* for Alexandria Municipality regarding the disposal of street sweepings, and for Shibîn el Kôm and Farshût regarding prostitutes.



## II. — REPORT ON SECTION II.

### 1.—GENERAL HOSPITALS.

The number of hospitals which are managed by the Department of Public Health remains the same as in 1913, *i.e.* twenty-two.

In these twenty-two hospitals there are 2,485 beds, as compared with 2,409 in 1913, an increase of seventy-six beds. This increase is due to the opening of a new and larger hospital at Qena and also to an increase in the number of beds at the Qasr el 'Aini Hospital.

In 1914 there were admitted 44,914 in-patients, as compared with 42,794 in 1913 and 40,460 in 1912, showing an increase of 2,120 in 1914.

Of these 44,914 in-patients 20,293 came to the hospital voluntarily while 24,621 were sent in by the Police.

The number of voluntary in-patients in 1913 was 17,652 and in 1912 was 17,039. Thus there was an increase of 2,641 in 1914.

The number of days of treatment given during 1914 was 681,680, as compared with 627,813 in 1913 and 614,921 in 1912. Here again there is an increase of 53,867.

The number of new out-patients during 1914 was 179,338, as compared with 207,882 in 1913, a decrease of 28,544.

The number of out-patient attendances during 1914 was 346,673, as compared with 417,845 in 1913, a decrease of 71,172.

The decrease in the number of new out-patients and in the number of out-patient attendances is due to the fact that early in 1914 a scale of fees for out-patient attendances was instituted in all the hospitals. These fees are 40, 20, 10, and 5 milliemes, according to the financial position of the patient. Of course the poor are still treated gratuitously.

The decision as to whether a patient should pay a fee or not and what fee he should pay lies with the Medical Officer in charge of the out-patient department.

These fees were instituted with the approval of the Ministry of Finance for two purposes: (*a*) in order to prevent "hospital abuse," that is to say persons using the out-patient departments of the hospitals who could afford to call in a doctor to their own homes, and (*b*) in order to reduce the number of out-patients and out-patient attendances as the work in the out-patient departments was becoming more than could be dealt with by the existing staff.

The above figures are shown in the table which follows on page 12.

Again in 1914 as in 1913 it is very satisfactory to note that there is a steady increase in the number of patients coming to the hospitals voluntarily.

The prejudice against hospitals which has existed so long in Egypt is gradually dying out owing to the increasing efficiency and to the tact of the Medical Officers, nursing sisters, and attendants.

The system of storekeeping in the provincial hospitals was reorganized during 1914. The system introduced was that known as the "Section Linen Room System," which is the one in force in nearly all the large hospitals of Europe.

The principles of the system were laid down in Departmental Order No. 94, dated December 28, 1913. An exception was made in the case of Qasr el 'Aini Hospital, as the Director of that hospital preferred to retain the old system owing to inadaptability of the ancient buildings of Qasr el 'Aini.

Arrangements were also made during 1914 for the examination of all pathological specimens from the provincial hospitals at the Pathological Department of the Qasr el 'Aini School of Medicine under the supervision of the Professor of Pathology. The following is an extract from the annual report of the Pathological Department of the School of Medicine :—

“ In course of time the results obtained will furnish most valuable information from the statistical point of view. The fact also that medical officers of hospitals throughout the country now have the means of obtaining a histological report on any tissues which they may send to the central laboratory for this purpose, cannot fail to be a stimulus to more accurate work. From the steady increase in such demands which have been made, more particularly during the four concluding months of the year, it is evident that this is being realized and appreciated. Since this work was started eighty specimens have been examined and reported on.”

The following short table shows the number of specimens examined month by month :—

May... ..	3 specimens.	September ... ..	9 specimens.
June ... ..	1 specimen.	October ... ..	16 ..
July ... ..	3 specimens.	November ... ..	18 ..
August ... ..	3 ..	December ... ..	27 ..

At the same time arrangements were made by which all bacteriological specimens from the provincial hospitals should be examined and reported on by the Hygienic Institute under the supervision of the Director of that Institute.

During 1914, nursing sisters were appointed to Tanta and Beni Suef hospitals. A credit was also obtained for the appointment of three nursing sisters at Mansûra hospital, but the posts have not yet been filled.

The following hospitals have now European nursing sisters in addition to the male and female Egyptian attendants: Qasr el 'Aini hospital, Abbassia Infectious hospital, Alexandria hospital, Suez hospital, Port Said hospital, Assiût hospital, Tanta hospital, Aswân hospital, and Beni Suef hospital.

The cost of upkeep of the hospitals during 1914 was L.E. 92,189·050 milliemes.

This figure does not include the expenses of the Central Administration nor does it include repairs and renewal of buildings.

The average cost per bed per annum was L.E. 37·098 milliemes, and the average cost per patient-day was 135 milliemes.

During 1913 the cost of upkeep was L.E. 83,698·539 milliemes, the average cost per bed per annum was L.E. 34·744 milliemes, and the average cost per patient-day was 133·3 milliemes.

The increase of expenditure during 1914 was due in part to the largely increased number of in-patients (2,120 more than in 1913) and in part to the extra equipment and apparatus which is being gradually supplied to the provincial hospitals in order to bring them up to date.

It is worthy of note that the cost per patient-day, which is by far the most important figure in these statistics, has only increased 1·7 milliemes since 1913.

Owing to the financial position of the Egyptian Government it has only of late years been possible to attempt to bring the provincial hospitals up to date in the matter of apparatus, equipment, instruments, etc.

Much has now been done in this direction, but there still remains a good deal to be accomplished.



During 1914, X-ray installations were installed in the following hospitals: Alexandria hospital, Assiût hospital, Port Said hospital, Suez hospital, Tanta hospital, and Zagazig hospital.

X-ray installations have also been ordered from England for Beni Suef and Mansûra hospitals. They will be installed early in 1915.

These X-ray installations supply a long-felt want, especially in the provincial hospitals where so many police cases are sent and where practically all the medico-legal work of the country is done.

The cost of the installations for Alexandria and Assiût hospitals and a portion of the cost of the installation for Beni Suef hospital was raised by public subscription. The cost of the installation at Zagazig hospital was borne partly by the Provincial Council of Sharqîa and partly by the Municipality of Zagazig.

The medical officers of all the hospitals where these installations have been installed have undergone a special course of training in X-ray technique and photography at the School of Medicine.

Three new statistical tables are included in the report for 1914. They are :—

(1) A detailed table showing the principal diseases among the in-patients treated in the hospitals.

(2) A detailed table showing the numbers of lunatics and suspected lunatics who were under observation in the hospitals and the numbers certified and sent on to the lunatic asylums.

(3) A table showing the receipts of the various hospitals, managed by the Department of Public Health.

The table showing the principal diseases treated in the in-patient department of the various hospitals is of interest in that it shows the distribution of these diseases in the various districts.

It also gives a very good idea of the prevalence of certain diseases in Egypt. For example it will be seen from this table that during 1914, 827 cases of dysentery were treated in the hospitals.

During the same period 404 cases of phthisis, 361 cases of nephritis, 184 cases of diabetes, 161 cases of pellagra, 610 cases of malaria, 733 cases of ankylostomiasis, and 2,299 cases of syphilis were among the diseases treated.

Of the surgical diseases and injuries 1,664 cases of simple fractures, 905 cases of compound fractures, 209 cases of malignant tumour, 485 cases of non-malignant tumour, 866 cases of bilharziasis, 708 cases of hæmorrhoids, sixty-one cases of appendicitis, and 345 cases of vesical calculus were among the diseases treated.

This table also shows the number of operations performed under a general anæsthetic in the various hospitals. The number during 1914 was 7,447. The table will be very useful in future years for purposes of comparison, as it will be a fairly accurate guide as to the increase or decrease in the prevalence of these diseases in Egypt.

In the future it is proposed to institute a table on similar lines to classify the principal diseases treated in the out-patient department of the hospitals.

The table showing the number of lunatics and suspected lunatics sent into the general hospitals during 1914 is interesting in that it gives considerable information as to the distribution of insanity in the various localities of Egypt.

The table of receipts from the general hospitals shows the sums which these institutions are bringing in to the Treasury. By deducting the total receipts of the hospitals (*i.e.* L.E. 7,230·291 milliemes) from the total expenditure (*i.e.* L.E. 92,189·050 milliemes) the actual cost to the Government of these institutions can be arrived at (*i.e.* L.E. 84,958·759 milliemes).

The following new buildings were commenced or completed during 1914.

A fifty-four bed general hospital was completed at Qena. It was opened in May and is now in complete working order. The painting of the hospital was postponed in order to allow the plaster to dry properly. This painting will be finished early in 1915.

A new section containing eighty-eight beds was completed at Alexandria hospital and is now occupied.

A second new section containing eighty beds was started at Alexandria hospital. The foundations had just been completed when the European war broke out and the work had to be stopped owing to lack of funds.

The home for the nursing sisters at Alexandria hospital was completed and is now occupied.

An infectious diseases hospital of eighteen beds was completed at Zagazig and is now in use.

A new out-patient department for Fayûm hospital was completed and is in use.

A new set of accumulators were supplied for the electric light installation at Qasr el 'Aini hospital.

The credit of L.E. 10,000 which was granted to build a new hospital at Damietta was withdrawn by the Ministry of Finance. The old hospital at Damietta having fallen down in 1912, the old Dervish prison at Damietta has been borrowed from the Ministry of Finance and fitted up as a temporary hospital. This building is very old and is in a very bad state of repair. It is not very suitable for the purpose for which it is being used, but was the only building obtainable.

The total amount spent on hospital repairs and renewals during 1914 was L.E. 5,797·301 milliemes.

The following hospitals were completely repaired and repainted during 1914: Beni Suef hospital, Damanhûr hospital, Fayûm hospital, Minia hospital, and Tanta hospital.

Mansûra hospital was repaired and a water-carriage drainage system was installed. The repainting of this hospital was left over until 1915.

Small repairs were undertaken at the following hospitals: Qasr el 'Aini, Alexandria, Assiût, Aswân, Benha, Damietta, Qena, Port Said, Shibîn el Kôm, Sohâg, Suez, Zagazig, and the Abbassia Infectious Diseases hospital.

TABLE X.—COMPARATIVE GENERAL STATISTICS.

	1913.	1914.	Increase or Decrease.
Number of hospitals ... ..	22	22	No change.
Number of beds ... ..	2,409	2,485	+ 76
Number of in-patients treated ... ..	42,794	44,914	+ 2,120
Of which voluntary patients ... ..	17,652	20,293	+ 2,641
Number of days of treatment ... ..	627,813	681,680	+53,867
Number of new out-patients ... ..	207,882	179,338	—28,544
Number of out-patient attendances ... ..	417,845	346,673	—71,172



TABLE XI.—PATIENTS AND COST.

HOSPITAL.	Number of Beds.	Number of In- Patients.	Number of New Out- Patients.	Number of Out- Patients' Visits.	Number of Operations under General Anæsthetic	Cost of Upkeep for 1914.		Cost per Bed per Annum.		Cost per Patient Day.
						L.E.	M.	L.E.	M.	M.
Qasr el 'Aini ... ..	652	10,543	54,301	102,934	2,177	30,235	861	46	374	149
Infectious Diseases ...	216	2,432	—	—	4	5,734	948	26	550	133
Alexandria... ..	320	7,794	17,565	45,182	1,376	14,134	840	44	171	137
Damietta ... ..	44	780	8,921	16,909	160	912	734	20	744	81
Port Said ... ..	133	2,784	23,439	31,816	357	5,155	023	38	759	168
Suez ... ..	106	1,639	6,279	12,425	356	4,813	033	45	406	235
Tanta ... ..	112	2,255	4,436	16,855	324	3,276	705	29	256	101
Mansûra ... ..	110	1,787	6,350	7,374	191	2,573	390	23	394	82
Damanhûr ... ..	63	1,300	3,840	4,900	164	1,747	358	27	735	110
Zagazig ... ..	90	1,859	2,606	4,832	267	2,582	339	28	692	112
Shibîn el Kôm ... ..	72	1,067	5,463	15,294	163	2,175	384	30	214	116
Qaliûb... ..	34	832	9,325	18,175	286	1,218	038	35	825	138
Benha... ..	51	1,420	3,172	6,687	186	1,862	000	36	509	105
Fayûm ... ..	45	828	5,649	9,912	176	1,604	583	35	657	140
Beni Suef ... ..	46	921	3,853	4,363	222	1,795	475	39	032	145
Minia ... ..	67	1,187	5,116	10,148	194	1,751	929	26	148	101
Assiût ... ..	135	2,576	5,243	8,948	488	3,884	944	28	777	105
Sohâg ... ..	50	1,136	2,100	6,036	124	1,561	898	31	238	87
Qena ... ..	54	739	5,250	9,586	102	1,946	192	36	040	175
Esna ... ..	26	446	1,632	4,572	60	998	410	38	400	146
Aswân ... ..	43	466	3,962	8,689	66	1,501	091	34	909	187
Mersa Matrûh ... ..	16	123	836	1,036	4	722	875	45	179	450
TOTAL ... ..	2,485	44,914	179,338	346,673	7,447	92,189	050	Average. 37	098	Average. 135

TABLE XII.—IN-PATIENTS (VOLUNTARY AND POLICE).

HOSPITAL.	Voluntary Cases.	Police Cases.	Total Number of Cases.	Total Number of Days' Treatment.	Number of Beds.
Qasr el 'Aini ... ..	5,237	4,780	10,017	202,579	652
Infectious Diseases ...	1,724	624	2,348	43,138	216
Alexandria... ..	3,864	3,667	7,531	103,491	320
Damietta ... ..	604	147	751	11,219	44
Port Said ... ..	1,716	978	2,694	30,687	133
Suez ... ..	1,358	233	1,591	19,767	106
Tanta ... ..	314	1,863	2,177	32,391	112
Mansûra ... ..	527	1,186	1,713	31,183	110
Damanhûr ... ..	498	757	1,255	15,935	63
Zagazig ... ..	435	1,380	1,815	22,983	90
Shibîn el Kôm ... ..	195	819	1,014	18,746	72
Qaliûb... ..	695	108	803	8,806	34
Benha... ..	432	967	1,399	17,820	51
Fayûm ... ..	368	438	806	11,421	45
Beni Suef ... ..	382	513	895	12,386	46
Minia ... ..	238	900	1,138	17,245	67
Assiût ... ..	914	1,546	2,460	36,816	135
Sohâg ... ..	172	919	1,091	18,018	50
Qena ... ..	148	566	714	11,060	54
Esna ... ..	247	186	433	6,387	26
Aswân... ..	127	317	444	7,998	43
Mersa Matrûh ... ..	98	19	117	1,604	16
TOTAL ... ..	20,293	22,913	43,206	681,680	2,485



TABLE XIII.—ADMISSIONS AND DISCHARGES.

HOSPITAL.	ADMITTED.			DISCHARGED.			
	Existing.	Admitted.	Total.	Cured.	Died.	Improved.	Remaining.
Qasr el 'Aini ... ..	526	10,017	10,543	5,726	950	3,445	422
Infectious Diseases ... ..	84	2,348	2,432	2,032	305	44	51
Alexandria ... ..	263	7,531	7,794	3,569	491	3,452	282
Damietta ... ..	29	751	780	522	21	209	28
Port Said ... ..	90	2,694	2,784	1,329	96	1,259	100
Suez ... ..	48	1,591	1,639	1,066	78	427	68
Tanta ... ..	78	2,177	2,255	1,826	126	214	89
Mansûra ... ..	74	1,713	1,787	1,456	148	101	82
Damanhûr ... ..	45	1,255	1,300	1,089	56	115	40
Zagazig ... ..	44	1,815	1,859	1,732	50	26	51
Shibîn el Kôm ... ..	53	1,014	1,067	875	37	124	31
Qaliûb ... ..	29	803	832	271	28	524	9
Benha ... ..	21	1,399	1,420	1,059	40	273	48
Fayûm ... ..	22	806	828	640	40	132	16
Beni Suef ... ..	26	895	921	667	54	167	33
Minia ... ..	49	1,138	1,187	747	39	349	52
Assiût ... ..	116	2,460	2,576	2,064	134	305	73
Sohâg ... ..	45	1,091	1,136	788	51	243	54
Qena ... ..	25	714	739	515	20	172	32
Esna ... ..	13	433	446	388	10	39	9
Aswân ... ..	22	444	466	353	14	81	18
Mersa Matrûh ... ..	6	117	123	85	8	27	3
TOTAL ... ..	1,708	43,206	44,914	28,799	2,796	11,728	1,591

TABLE XIV.—OUT-PATIENTS' DIVISION (HOSPITALS).

HOSPITAL.	Number of Patients.	Number of Attendances.	HOSPITAL.	Number of Patients.	Number of Attendances.
			<i>Brought forward</i> ...	133,200	258,521
Qasr el 'Aini ... ..	54,301	102,934	Qaliûb ... ..	9,325	18,175
Infectious Diseases ... ..	—	—	Benha ... ..	3,172	6,687
Alexandria ... ..	17,565	45,182	Fayûm ... ..	5,649	9,912
Damietta ... ..	8,921	16,909	Beni Suef ... ..	3,853	4,363
Port Said ... ..	23,439	31,816	Minia ... ..	5,116	10,148
Suez ... ..	6,279	12,425	Assiût ... ..	5,243	8,948
Tanta ... ..	4,436	16,855	Sohâg ... ..	2,100	6,036
Mansûra ... ..	6,350	7,374	Qena ... ..	5,250	9,586
Damanhûr ... ..	3,840	4,900	Esna ... ..	1,632	4,572
Zagazig ... ..	2,606	4,832	Aswân ... ..	3,962	8,689
Shibîn el Kôm ... ..	5,463	15,294	Mersa Matrûh ... ..	836	1,036
<i>Carried forward</i> ...	133,200	258,521	TOTAL ...	179,338	346,673

TABLE XV.—HOSPITALS RECEIPTS.

HOSPITAL.	RECEIPTS.		HOSPITAL.	RECEIPTS.	
	L.E.	M.		L.E.	M.
			<i>Brought forward</i> ...	5,629	617
Qasr el 'Aini ... ..	1,101	249	Qaliûb... ..	23	542
Infectious Diseases ... ..	613	095	Benha ... ..	258	934
Alexandria... ..	756	041	Fayûm ... ..	100	520
Damietta ... ..	110	759	Beni Suef ... ..	162	725
Port Said ... ..	1,128	547	Minia ... ..	144	182
Suez ... ..	975	685	Assiût ... ..	424	610
Tanta ... ..	168	644	Sohâg ... ..	107	934
Mansûra ... ..	326	525	Qena ... ..	53	408
Damanhûr ... ..	189	520	Esna ... ..	136	480
Zagazig ... ..	132	434	Aswân ... ..	153	080
Shibîn el Kôm ... ..	127	118	Mersa Matrûh ... ..	35	259
<i>Carried forward</i> ...	5,629	617	TOTAL ...	7,230	291

TABLE XVI.—LUNATICS (SUSPECTED AND CERTIFIED).

HOSPITAL.	Number of Cases Certified and Sent to Asylum.			Number of Cases Discharged as not Insane.			Number of Cases Released as Recovered.			Number of Cases Released as still Insane but not requiring Asylum Treatment.			Total Cases admitted into Hospitals in 1914.			Total Cases admitted into Hospitals in 1913
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	
Esna ... ..	—	1	1	—	—	—	—	—	—	—	—	—	—	1	1	1
Sohâg ... ..	14	3	17	2	—	2	—	—	—	4	—	4	20	3	23	44
Damietta ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Assiût ... ..	5	3	8	3	—	3	4	1	5	2	1	3	14	5	19	42
Beni Suef ... ..	12	—	12	1	—	1	—	—	—	3	—	3	16	—	16	9
Qena ... ..	2	1	3	—	—	—	2	—	2	—	—	—	4	1	5	—
Mansûra ... ..	9	2	11	3	1	4	—	—	—	13	1	14	25	4	29	93
Damanhûr ... ..	7	—	7	1	—	1	—	—	—	9	—	9	17	—	17	23
Port Said ... ..	5	7	12	5	1	6	—	—	—	6	7	13	16	15	31	52
Minia ... ..	2	2	4	—	—	—	3	—	3	—	—	—	5	2	7	24
Shibîn el Kôm ... ..	2	3	5	3	—	3	1	1	2	2	1	3	8	5	13	46
Suez ... ..	2	1	3	3	1	4	—	—	—	—	—	—	5	2	7	10
Fayûm ... ..	2	1	3	—	—	—	—	—	—	12	1	13	14	2	16	14
Qasr el 'Aini (Cairo)	23	17	40	13	2	15	—	—	—	—	—	—	36	19	55	55
Infectious Diseases (Cairo)	1	1	2	—	—	—	—	—	—	—	—	—	1	1	2	4
Tanta ... ..	15	3	18	3	—	3	—	1	1	4	—	4	22	4	26	82
Qaliûb... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Benha .. ..	7	1	8	7	—	7	—	—	—	4	—	4	18	1	19	35
Alexandria... ..	46	12	58	1	—	1	—	—	—	40	12	52	87	24	111	260
Aswân... ..	5	—	5	—	—	—	—	—	—	—	1	1	5	1	6	13
Zagazig ... ..	8	1	9	1	—	1	—	—	—	3	—	3	12	1	13	5
Mersa Matrûh ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2
TOTAL ...	167	59	226	46	5	51	10	3	13	102	24	126	325	91	416	814
Compare in 1913	256	98	354	88	25	113	49	4	53	238	56	294	631	183	814	

TABLE XVII.—RETURN OF SICK.

SECTION.	Alexandria.	Suez.	Port Said.	Damietta.	Tanta.	Damanhour.	Manshara.	Zagazig.	Shibin el Kôm.	Benha.	Qaliûb.	Mersa Matruh.	Qasr el 'Aini.	Infectious Diseases.	Beni Suef.	Fayûm.	Minia.	Assiût.	Sohâg.	Qena.	Esna.	Aswân.	TOTAL.
<i>Medical :—</i>																							
Alimentary :—																							
Diseases of Stomach	164	—	18	15	23	—	1	23	87	67	4	4	189	—	11	6	12	53	5	5	—	14	701
Tuber. Peritonitis	4	2	22	7	—	—	—	—	—	—	—	—	43	—	—	—	—	—	1	1	—	1	82
Dysentery	133	69	221	27	24	17	10	26	—	35	3	—	173	—	2	4	1	20	24	13	15	10	827
Diarrhœa and Enteritis	123	17	523	9	45	—	32	35	6	8	3	1	96	—	4	9	5	31	5	7	8	—	967
Liver	66	11	37	33	6	—	7	3	—	2	3	4	46	—	8	5	8	18	2	1	1	1	262
Other Diseases	131	33	34	10	3	—	3	—	1	15	1	1	153	—	8	13	25	18	—	—	6	—	455
Respiratory :—																							
Pneumonia...	48	54	62	2	5	4	3	6	7	15	4	1	54	40	10	3	11	8	3	2	2	3	347
Phthisis	177	23	43	8	5	—	17	—	—	5	3	6	66	—	1	1	4	26	4	2	4	9	404
Pleurisy	23	9	16	1	2	1	1	11	—	1	1	2	33	—	1	2	—	2	—	2	—	2	110
Other Diseases	301	33	26	15	14	—	8	4	12	37	20	5	50	—	16	8	10	27	4	6	11	1	608
Circulatory :—																							
Heart	63	11	3	15	13	—	1	16	—	3	11	5	110	—	6	3	—	14	2	3	1	4	284
Other Diseases	22	17	18	2	—	—	—	16	14	4	—	—	73	—	1	—	—	4	—	1	—	1	173
Urinary :—																							
Nephritis	67	10	13	11	47	17	12	32	11	22	8	2	74	—	5	2	—	13	4	5	3	3	361
Other Diseases	59	24	6	7	16	—	6	4	1	20	2	1	43	—	39	—	14	29	—	2	8	1	282
Blood :—																							
Spleen...	33	2	3	15	5	—	—	8	4	5	1	—	74	—	—	—	—	6	—	—	2	—	158
Other Diseases	48	6	15	1	—	—	19	—	—	3	79	—	39	—	1	3	—	6	—	1	9	—	230
Nervous :—																							
Brain	45	2	2	1	7	—	3	—	—	1	1	—	43	—	3	1	—	6	1	3	—	4	123
Spinal Cord	27	—	2	6	2	—	—	—	1	—	—	—	76	—	3	1	1	—	1	—	—	1	121
Other Diseases	80	11	—	6	16	—	9	1	1	1	—	—	35	—	4	3	3	30	—	3	3	6	212
Constitutional :—																							
Rheumatism	139	20	41	10	17	5	11	9	12	22	3	4	82	—	6	8	9	4	5	3	2	1	413
Diabetes	29	3	8	3	—	1	1	—	—	1	1	—	111	—	2	—	—	12	6	—	4	2	184
Senility	52	6	41	2	7	—	1	—	—	3	3	—	167	—	—	—	—	—	—	1	7	—	290
Debility	64	19	40	2	13	—	5	37	5	8	8	4	309	—	1	1	—	46	1	5	3	1	572
Parasitic :—																							
Pellagra	20	15	—	11	12	—	19	6	2	36	2	—	29	—	1	2	1	7	—	1	2	—	166
Malaria	15	89	48	2	10	23	37	10	70	42	1	12	161	32	4	—	10	13	11	12	2	6	610



[illegible]

## 2.—GOVERNMENT DISPENSARIES.

The number of Government dispensaries managed by the Department of Public Health during 1914 was forty-three as compared with forty-five in 1913. These dispensaries are situated in the Public Health Offices in the Markaz towns.

Two dispensaries were closed at the end of 1913, *i.e.* those at Embâba and Sennûres

The Embaba dispensary was closed owing to its proximity to Cairo, and the Sennûres dispensary was closed because a private dispensary was opened in that town.

The policy of the Department of Public Health is only to have dispensaries in the towns in which there is no good private dispensary. When a satisfactory private dispensary opens in a town the Department closes its dispensary. A few simple drugs and dressings are, however, left in charge of the medical officer for the gratuitous treatment of the poor. The number of patients treated free of charge in the forty-three Government dispensaries in 1914 was 44,018, as compared with 40,281 in 1913 and 31,946 in 1912.

In all Markazes where a Government dispensary does not exist the medical officer is supplied by the Department with a number of simple drugs and first aid dressings in order that he may be able to treat the poor gratuitously.

A new table has been inserted this year in the Report showing the receipts of the various dispensaries.

The total receipts for the year amounted to L.E. 780·826 milliemes.

TABLE XVIII.—OUT-PATIENTS TREATED GRATUITOUSLY IN GOVERNMENT DISPENSARIES DURING 1914.

DISPENSARY.	Number of Patients.	DISPENSARY.	Number of Patients.
		<i>Brought forward</i> ... ..	21,326
Rosetta ... ..	755	Abu Qurqâs... ..	915
El 'Atf ... ..	1,682	Wasta ... ..	6,035
Itâi el Barûd... ..	4,295	Deirût ... ..	1,057
Delingât... ..	349	Manfalût ... ..	2,251
Shubrakhît ... ..	523	Abnûb ... ..	606
Baltîm (Borollos)... ..	125	Abu Tîg ... ..	822
Barrage ... ..	708	Badâri ... ..	1,262
Fareskur... ..	58	Tema ... ..	899
Kafr el Sheikh ... ..	546	Akhmîm ... ..	792
Fûa ... ..	286	Girga ... ..	1,134
Abu Hommos ... ..	1,170	Baliâna... ..	371
Santa ... ..	174	Nag <sup>c</sup> Hamâdi ... ..	282
Quesna ... ..	706	Deshna... ..	170
Shibîn el Qanâter... ..	1,676	Qûs ... ..	108
Menzala ... ..	185	Qoseir ... ..	234
Kafr el Dawar ... ..	66	Edfu ... ..	134
El Saff ... ..	859	El Derr ... ..	127
Beba ... ..	862	Sîwa Oasis ... ..	2,766
Etsa... ..	545	Bahrîa Oasis ... ..	761
Beni Mazâr ... ..	3,618	Dakhla Oasis ... ..	1,568
Bassiûn ... ..	29	Kharga Oasis ... ..	398
Samallût... ..	2,109		
<i>Carried forward</i> ... ..	21,326	TOTAL ... ..	44,018



TABLE XIX.—DISPENSARIES' RECEIPTS.

DISPENSARY.	RECEIPTS.		DISPENSARY.	RECEIPTS.	
	L.E.	M.		L.E.	M.
Rosetta ... ..	23	389	<i>Brought forward</i> ...	438	625
El 'Atf ... ..	39	140	Abu Qurqâs ... ..	13	000
Itâi el Barûd ... ..	50	471	Wasta ... ..	12	846
Delingât ... ..	10	747	Deirût... ..	13	070
Shubrakhît ... ..	13	786	Manfalût ... ..	35	164
Baltîm (Borollos) ... ..	14	460	Abnûb... ..	11	850
Delta Barrage ... ..	5	410	Abu Tig ... ..	13	320
Fareskûr ... ..	9	565	Badâri... ..	11	465
Kafr el Sheikh ... ..	12	704	Tema ... ..	8	342
Fûa ... ..	17	958	Akhmîm ... ..	5	793
Abu Hommos ... ..	4	777	Girga ... ..	17	955
Santa ... ..	15	071	Baliâna ... ..	14	482
Quesna ... ..	7	580	Nag <sup>c</sup> Hamâdi ... ..	28	743
Shibîn el Qanâter ... ..	19	997	Deshna ... ..	28	200
Menzala ... ..	23	660	Qûs ... ..	17	755
Kafr el Dawâr ... ..	12	645	Qoseir... ..	20	441
El Saff ... ..	22	250	Edfu ... ..	18	444
Beba ... ..	43	898	El Derr ... ..	2	860
Sennûres ... ..	2	951	Sîwa Oasis... ..	11	990
Etsa ... ..	9	508	Bahrîa Oasis ... ..	6	205
Beni Mazâr ... ..	50	551	Dakhla Oasis ... ..	4	871
Bassiûn ... ..	10	510	Kharga Oasis ... ..	2	720
Samallût ... ..	17	597	Râs el Bar ... ..	42	685
<i>Carried forward</i> ... ..	438	625	<i>TOTAL</i> ... ..	780	826

3.—EGYPTIAN MIDWIVES.

There are at present two courses of instruction for the training of Egyptian midwives in Egypt: (1) the ordinary course at the provincial hospitals, and (2) the course at the maternity homes.

(1) *Ordinary Course*.—Under this system the Egyptian midwives undergo a short and elementary course of training in the provincial hospitals. The course extends over a period of three weeks, after which the successful candidates are given licences to practise the profession of midwifery (white certificates).

(2) *The Course at the Maternity Homes*.—One of the objects of maternity homes is to supply Egyptian midwives of a higher standard by giving them more advanced training than the elementary course given in the provincial hospitals. The course at the maternity homes lasts three months, during which the midwife receives instruction on the treatment of simple ailments of children in addition to practical training in midwifery.

At the expiration of the course of instruction an examination is held by the Department of Public Health, and candidates who pass the examination are given a special green certificate.

Candidates for the course at maternity homes are as a rule selected from among Egyptian midwives already holding Public Health licences under system (1).

Other women may be admitted to this course, but they are required to pass an additional examination in the following subjects:—

- (1) Examination of dead bodies to determine cause of death.
- (2) Elementary instruction in the recognition of the more important and common infectious diseases.
- (3) Recognition of deaths from criminal or accidental causes.

Maternity homes are at present instituted in the following Mudiria towns and are managed and maintained by the respective Provincial Councils, namely, Tanta, Zagazig, Mansûra, Shibîn el Kôm, Minia, and Sohâg.

The following figures show the amount of work done by these institutions as well as by the ordinary hospital courses during 1914 :—

(1) Number of ordinary Egyptian midwives who attended lectures in hospitals	511
Number of those who passed the examination ... ..	461
„ „ failed ... ..	50
(2) Number of Egyptian midwives who attended midwifery course in the maternity homes ... ..	189
Number of those who passed the examination ... ..	180
„ „ failed ... ..	9

#### 4.—CHILDREN'S DISPENSARIES.

The object of these institutions is to afford medical relief to sick children and to instruct mothers in the methods of cleanliness and of the proper feeding and bringing up of children. They also serve as a training ground for Egyptian midwives in so far as regards the care of children.

Children's dispensaries exist in the following towns : Tanta, Mansûra, Zagazig, Shibîn el Kôm, Fayûm, Gîza, Assiût, Beni Suef, Minia, and Port Said.

They are managed and maintained by the Provincial Councils, and in the case of Port Said by the Municipality.

The number of cases treated in these dispensaries during 1914 are shown in the following table :—

TABLE XX.

DISPENSARY.	New Cases.	Old Cases.	Total Attendances.
Assiût ... ..	8,387	31,456	39,843 (12 months).
Minia (average) ... ..	5,400	25,200	30,600 „
Beni Suef ... ..	3,274	11,904	15,178 „
Fayûm ... ..	5,400	34,921	40,321 „
Tanta ... ..	7,475	21,706	29,181 „
Mansûra ... ..	4,802	20,521	25,323 „
Zagazig (average) ... ..	3,064	11,764	14,828 „
Port Said ... ..	6,275	18,065	24,340 (7 months).
Gîza ... ..	613	3,699	4,312 (2 months).
Menûf ... ..	2,911	22,852	25,763 (11 months).
TOTAL ... ..	47,601	202,088	249,689

In connection with the Maternity Homes and Children's Dispensaries mentioned above, it may be noted that under the able management of the Central Ladies Committee of Cairo, six maternity schools and ten children's dispensaries have been established in the leading provincial towns. These institutions are maintained by the Provincial Councils, and controlled by the Central Ladies Committee, assisted by local committees. In the maternity schools the village midwives receive a course of training under qualified English matrons, and in the children's dispensaries the children are treated for common ailments and their mothers instructed by qualified English nurses in the principles of cleanliness, clothing, proper diet, and the treatment of the common diseases of childhood. A lady doctor was appointed as Inspectress to visit each school and dispensary in turn, and to exercise a general personal supervision over the work so as to ensure a uniform standard of training of midwives for their diplomas, and to keep the Central Ladies Committee in full touch with all that is going on. These institutions have met a much-needed want, and are the means of saving many young lives and disseminating useful knowledge among the people.



### III. — REPORT ON SECTION III.

#### 1.—OPHTHALMIC SECTION.\*

*Number of Hospitals.*—The number of hospitals at work during 1914 was fourteen ; three of these were opened during the course of the year.

*Travelling Hospitals.*—The travelling hospitals have well maintained their popularity among the *fellahîn* ; they present the great advantage that, with a limited sum of money, a certain amount of ophthalmic relief can be distributed in many districts.

*Permanent Hospitals.*—Permanent hospitals, which form the backbone of the Egyptian system of ophthalmic relief, have now been built in eleven of the principal towns, and arrangements for building in Fayûm and Santa have been completed.

TABLE XXI.—SOURCES OF PROVISION AND MAINTENANCE OF HOSPITALS.

	PROVIDED BY	MAINTAINED BY	DATE OPENED.
<i>Permanent :—</i>			
Tanta ... ..	Government grant ...	Government grant... ..	1908
Assiût ... ..	Public subscription and Government grant ...	" " ... ..	1911
Mansûra... ..	Gift by Badrawi Pasha	" " ... ..	1912
Beni Suef ... ..	Public subscription ...	" " ... ..	1912
Zagazig ... ..	Provincial Council... ..	" " ... ..	1913
Mahalla el Kubra ... ..	" " ... ..	Provincial Council... ..	1913
Kafr el Zayât ... ..	" " ... ..	" " ... ..	1913
Damanhûr ... ..	" " ... ..	Government grant... ..	1914
Shibîn el Kôm ... ..	Public subscription ...	" " ... ..	1914
Sohag ... ..	" " ... ..	" " ... ..	1914
<i>Travelling :—</i>			
No. 1 Camp ... ..	Sir Ernest Cassel ... ..	Sir Ernest Cassel ... ..	1904
" 2 " ... ..	" " ... ..	" " ... ..	1905
Assiût No. 1 ... ..	Provincial Council... ..	Provincial Council... ..	1912
Daqahliâ No. 1 ... ..	" " ... ..	" " ... ..	1913
<i>Travelling Hospital Closed for Financial Reasons :—</i>			
Gharbîâ No. 1 ... ..	Provincial Council... ..	Provincial Council... ..	1911
" " 2 ... ..	" " ... ..	" " ... ..	1911

*School Inspection.*—Ophthalmic inspection and treatment of the pupils of Government primary schools has been commenced from the beginning of the present school session. This has been based on the experience gained during the last seven years at Tanta school, where systematic inspection and efficient treatment have been carried on.

*Clinical Work and Finances.*—The actual sum spent last year on hospital maintenance was L.E. 12,385. For this sum 50,126 new patients were treated ; 686,012 attendances were made by out-patients ; 40,679 daily diets were issued to 2,071 in-patients ; and 40,710 operations were performed.

It should be noted that considerable voluntary economies have been carried out in view of the financial situation created by the war ; also two inspectors who were reserve officers have been recalled, one by the War Office and one by the Admiralty, and their salaries have therefore been economized during the last six months. Such economies as have been made have been at the cost of a certain amount of efficiency.

*Clearing Hospitals.*—Two tent hospitals have been organized at the Suez Canal front of the war for Turkish wounded. They are completely equipped with operation tents fitted with electric light, beds, etc.

\* A special report on this work has been published.



TABLE XXII.—PERMANENT AND TRAVELLING OPHTHALMIC HOSPITALS.

	1904.	1905.	1906.	1907.	1908.	1909.	1910.	1911.	1912.	1913.	1914.
<i>Hospitals in existence:—</i>											
Travelling ... ..	1	2	2	2	2	2	2	3	4	5	4
Permanent ... ..	—	—	—	—	1	1	1	2	4	7	10
New patients treated ... ..	2,954	4,210	7,327	7,446	7,794	12,092	14,342	20,488	28,029	40,670	50,126
Total attendance of out-patients ... ..	15,039	50,680	94,204	146,830	132,278	177,761	190,247	236,411	341,211	544,267	686,012
Operations performed ... ..	1,282	2,480	5,846	6,794	6426	9,930	11,486	14,322	21,315	30,648	40,710
In-patients ... ..	49	140	202	184	208	390	443	678	909	1,807	2,071
<i>Details:—</i>											
Patients examined ... ..	...	...	...	...	19,614	22,373	25,514	31,274	43,668	62,233	75,398
Patients regularly treated ... ..	...	...	...	...	7,794	12,092	14,342	20,488	28,029	40,670	50,126
Incurable cases ... ..	...	...	...	...	4,550	2,302	1,776	2,620	7,200	9,541	10,554
Blind in one eye ... ..	...	...	...	...	1,189	2,116	2,438	3,196	4,115	5,360	6,425
Blind in both eyes ... ..	...	...	...	...	852	1,385	3,010	2,811	2,824	3,878	3,591
Trichiasis cases examined ... ..	...	...	...	...	8,159	10,060	7,507	7,871	13,176	17,329	21,624
“ “ operated on and cured ... ..	...	...	...	...	2,262	3,128	2,022	3,933	6,942	11,700	16,542
<i>New patients treated per age:—</i>											
Under 1 year ... ..	...	...	...	...	247	516	457	761	1,495	2,700	2,472
From 1 to 5 years ... ..	...	...	...	...	585	1,645	1,497	1,903	3,317	4,631	6,394
“ 6 „ 10 „ ... ..	...	...	...	...	902	1,442	4,469	2,101	3,210	4,786	5,634
“ 11 „ 15 „ ... ..	...	...	...	...	849	1,294	1,475	2,051	3,056	3,799	4,570
“ 16 „ 20 „ ... ..	...	...	...	...	829	1,156	1,499	2,067	2,588	3,253	3,949
“ 21 „ 40 „ ... ..	...	...	...	...	2,584	3,775	4,845	6,116	8,167	12,679	17,257
“ 41 and over ... ..	...	...	...	...	1,798	2,206	3,100	5,589	6,196	8,822	9,850

2.—ANKYLOSTOMIASIS CAMPAIGN.

The ankylostomiasis campaign has now been carried on with the financial assistance of the International Health Commission for little more than a year. The system adopted has been the provision of tent camps each containing fifty to a hundred beds, where the patients are treated by the three-day thymol method introduced by us.

The number of patients admitted to the hospitals for treatment amounts to 7,547. The cost of treatment at the present time is 167 milliemes\* per patient, including 99 milliemes† for food. The number of microscopical examinations made for ova has been 13,289. Patients are re-examined a month after discharge from the hospital, and ninety per cent of them are found to be cured, that is to say have no ankylostomiasis ova in their fæces.

Three clinical notes have been written and forwarded to the International Health Commission. The experience gained goes to show that the treatment of the disease on a large scale can only be carried out satisfactorily in camps or in buildings which have been specially erected for the purpose.

There is no doubt that there is urgent need for the provision in every Mudiria of a permanent centre with accommodation for not less than fifty patients where the disease can be treated.

A survey of the province of Sharqîa has been carried out with a view to determine the incidence of ankylostomiasis and shows that not less than fifty-six per cent of the male population are so affected. The survey is now being continued in the Province of Assiût. A full report on the survey has been prepared and forwarded to the International Health Commission.

Prevention of infection by the ankylostoma duodenale depends on the inhibition of the development of the ova in the dejection of infected persons and awaits solution in Egypt as in many other countries.

It is unlikely that any further scientific progress can be made until the campaign obtains the services of at least two British inspecting physicians ; the appointment of these was proceeding but was prevented by the outbreak of the war.

TABLE XXIII.—STATISTICS OF ANKYLOSTOMIASIS HOSPITALS.‡

<i>May 1 to December 31.</i>																		
Age of patients treated :—																		
1-5	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	5
6-10	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	796
11-15	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1,617
16-20	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1,045
21-40	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	2,100
Over 40...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	400
TOTAL																	...	5,963
Habitat :—																		
(1) Villages by name of Markaz in which hospital is situated...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3,876
(2) Other Markazes of Mudiria in which hospital is situated	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	419
(3) Other Mudirias than that in which hospital is situated	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1,668

\* 167 Milliemes = about 3s. 5d.  
† 99 „ = „ 2s. 1d.  
‡ This does not include patients treated from January 1 to April 30.

Symptoms of anaemia:—

Slight ... ..	1,672
Marked ... ..	3,632
Severe ... ..	647

Pellagra:—

Present ... ..	491
Per cent of those examined ... ..	8.2

Albuminuria:—

Present ... ..	3,275
Per cent of those examined ... ..	54.9

Albuminuria in the absence of red blood cells in urine or bilharzia ova:—

Present ... ..	175
Per cent of those examined ... ..	2.9

Bilharzia ova (bilharzia ova or red blood cells in urine):—

Present ... ..	3,408
Per cent of those examined ... ..	57.1

Liver:—

Enlarged ... ..	599
Per cent of those examined ... ..	10.0

Heart:—

Dilated ... ..	512
Per cent of those examined ... ..	8.5

Spleen:—

Enlarged ... ..	952
Per cent of those examined ... ..	15.9

Number of microscopical examinations:—

Ankylostoma ova:—

Positive... ..	6,712
Negative ... ..	5,193

Bilharzia ova:—

Positive... ..	3,337
Negative ... ..	2,629

Number of patients admitted to hospital ... .. 5,963

Number of patients admitted to Murad Pasha's Hospital, Deir, up to August 10, 1914, detailed statistics not included in above statistics ... .. 293

Number of patients discharged:—

(1) After thymolization ... ..	5,831
(2) Without completing thymol course ... ..	278
(3) After complete anthelmintic course other than thymol ... ..	143
(4) After incomplete anthelmintic course other than thymol ... ..	4
Number of patients who had more than one thymol course at Deir ... ..	32

Worms other than ankylostoma:—

Ascaris ... ..	1,469
Oxyuris... ..	2,313



# IV.—REPORT ON SECTION IV.

## 1.—EPIDEMICS.

### (a) NOTIFIABLE INFECTIOUS DISEASES IN GENERAL.

Below will be found tabulated the statistics of the various infectious diseases notified during the past year :—

TABLE XXIV.—NOTIFIABLE INFECTIOUS DISEASES IN GENERAL.

GOVERNO- RATE.	Smallpox.		Measles.		Diphtheria.		Typhoid Fever.		Typhus Fever.		Relapsing Fever.		Plague.		Scarlet Fever.		Cerebro- spinal Meningitis.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Cairo ...	983	181	469	124	1412	685	1409	311	351	232	10	1	—	—	98	9	146	67
Aléxandria	171	53	988	261	114	33	348	143	482	160	4	—	43	23	48	3	15	7
Damietta	1	—	2	—	11	9	6	1	9	4	—	—	1	—	1	1	—	—
Port Said	21	4	31	3	25	11	47	14	25	13	—	—	50	20	8	1	9	6
Suez ...	7	4	37	7	9	2	39	13	—	—	—	—	—	—	7	—	3	1
Ismailîa ...	10	3	—	—	15	7	28	12	9	3	2	—	1	1	3	—	—	—
Sinai ...	—	—	—	—	8	—	—	—	—	—	—	—	—	—	—	—	—	—
TOTAL...	1193	245	1527	395	1594	747	1877	494	876	412	16	1	95	44	165	14	173	81

TABLE XXIV.—NOTIFIABLE INFECTIOUS DISEASES (*continued*).

PROVINCE AND DISTRICT.		SMALLPOX.		MEASLES.		DIPHTHERIA.		TYPHOID FEVER.		TYPHUS FEVER.		RELAPSING FEVER.		PLAGUE.		SCARLET FEVER.		CEREBRO-SPINAL MENINGITIS.	
		Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
<i>Gharbîa Province :—</i>																			
Tanta district	...	233	56	293	150	60	38	8	8	141	44	1	—	8	2	—	—	—	—
Kafr el Sheikh district	...	2	1	9	2	1	—	—	—	266	31	—	—	—	—	—	—	—	—
Mahalla el Kubra district	...	50	7	20	3	55	28	7	4	115	26	—	—	—	—	—	—	—	—
Sherbîn district...	...	7	2	3	2	—	—	—	—	42	14	—	—	—	—	—	—	—	—
Kafr el Zayât district	...	132	15	39	4	—	—	2	1	124	30	—	—	—	—	—	—	—	—
Desûq district	...	74	36	22	8	2	2	—	—	220	40	—	—	—	—	—	—	—	—
Santa district	...	164	27	22	13	—	—	—	—	38	14	8	—	—	—	—	—	—	—
Talkha district	...	6	—	25	6	2	—	—	—	79	16	—	—	—	—	—	—	—	—
Fûa district	...	159	27	—	—	—	—	—	—	1	—	34	6	—	—	—	—	—	—
Zifta district	...	137	12	1	—	17	8	—	—	61	15	—	—	4	2	—	—	—	—
Borollos district	...	2	—	—	—	1	1	—	—	—	—	—	—	1	—	—	—	—	—
TOTAL	...	966	183	434	188	138	77	17	13	1,087	230	43	9	13	4	—	—	—	—
<i>Daqahlîa Province :—</i>																			
Mansûra district	...	60	6	2	—	150	98	23	2	730	158	26	1	1	—	—	—	2	—
Simbellawein district	...	50	4	3	—	1	—	2	—	10	1	—	—	—	—	—	—	—	—
Mît Ghamr district	...	76	19	93	40	—	—	1	—	—	—	—	—	—	—	—	—	1	—
Dekernes district	...	34	—	182	94	3	1	—	—	953	184	4	—	—	—	—	—	—	—
Matarîa district...	...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Aga district	...	102	13	—	—	1	1	—	—	149	34	—	—	—	—	—	—	—	—
Faraskûr district	...	15	1	33	17	—	—	—	—	163	22	43	1	—	—	—	—	—	—
TOTAL	...	337	43	313	151	155	100	26	2	2,005	399	73	2	1	—	—	—	3	—
<i>Beheira Province :—</i>																			
Damanhûr district	...	54	10	18	12	17	14	8	4	244	59	—	—	—	—	—	—	1	1
Shubrakhît district	...	67	6	137	57	9	6	4	2	148	27	—	—	—	—	—	—	—	—
Itâi district	...	23	3	97	74	4	4	1	—	461	102	—	—	—	—	—	—	—	—
Rashîd district	...	129	24	60	8	10	8	—	—	16	7	—	—	—	—	—	—	—	—
Kôm Hamâda district	...	75	5	—	—	1	1	—	—	421	92	—	—	—	—	—	—	—	—
Abu Homnos district	...	56	9	—	—	—	—	—	—	176	23	—	—	—	—	—	—	—	—
Delingât district	...	17	5	—	—	—	—	—	—	215	85	—	—	—	—	—	—	—	—
Kafr el Dawâr district	...	28	5	21	5	3	1	—	—	270	40	—	—	—	—	—	—	—	—

[illegible]



TABLE XXIV.—NOTIFIABLE INFECTIOUS DISEASES (continued).

PROVINCE AND DISTRICT.		SMALLPOX.		MEASLES.		DIPHTHERIA.		TYPHOID FEVER.		TYPHUS FEVER.		RELAPSING FEVER.		PLAGUE.		SCARLET FEVER.		CEREBRO-SPINAL MENINGITIS.	
		Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
<i>Fayûm Province:—</i>																			
Fayûm district...	...	110	18	65	20	73	45	21	8	3	2	—	—	5	1	1	—	—	—
Etsa district ...	...	218	76	6	5	14	13	1	—	—	—	—	—	9	4	—	—	2	—
Sennûres district ...	...	49	13	84	35	18	16	5	2	5	5	—	—	6	3	—	—	1	—
TOTAL ...	...	377	107	155	60	105	74	27	10	8	7	—	—	20	8	1	—	3	—
<i>Beni Suef Province:—</i>																			
Beni Suef district ...	...	238	46	111	25	13	7	1	1	8	5	2	—	—	—	2	2	1	1
Beba district ...	...	92	22	9	1	3	2	—	—	6	5	—	—	—	—	—	—	—	—
Wasta district ...	...	17	2	57	9	—	—	—	—	1	1	—	—	—	—	—	—	—	—
TOTAL ...	...	347	70	177	35	16	9	1	1	15	11	2	—	—	—	2	2	1	1
<i>Minia Province:—</i>																			
Minia district ...	...	151	50	19	10	12	7	10	6	6	3	7	1	19	8	—	—	1	1
Abu Qurqâs district ...	...	45	7	19	11	—	—	—	—	18	5	22	6	18	10	—	—	—	—
Samallût district ...	...	32	7	28	11	1	1	—	—	4	2	18	7	1	1	—	—	—	—
Beni Mazâr district...	...	47	9	9	4	2	2	6	1	—	—	—	—	—	—	—	—	—	—
Maghâgha district ...	...	10	3	—	—	2	1	—	—	32	—	—	—	—	—	—	—	—	—
El Fashn district ...	...	12	1	61	28	4	3	—	—	51	0	—	—	1	—	—	—	—	—
TOTAL ...	...	297	77	136	64	21	14	16	7	111	20	47	14	39	19	—	—	1	1
<i>Assiût Province:—</i>																			
Assiût district ...	...	65	54	21	16	12	11	24	20	18	13	5	—	—	—	—	—	—	—
Mallâwi district ...	...	28	15	6	3	13	6	1	1	57	6	9	1	9	2	—	—	—	—
Deirût district ...	...	64	22	84	48	2	2	—	—	53	13	—	—	2	2	—	—	—	—
Manfalût district ...	...	53	14	100	76	5	5	1	1	38	4	—	—	2	2	—	—	—	—
Abu Tîg district ...	...	22	12	—	—	1	1	—	—	103	37	—	—	—	—	—	—	—	—

Badâri district ...	...	...	...	...	...	11	9	4	3	2	—	—	—	—	—	170	52	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—</
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The following diseases were also recorded :—

	Cases.		Deaths.			Cases.		Deaths.	
Chicken pox ... ..	443		1		Tetanus ... ..	112		84	
Puerperal fever... ..	209		209		Leprosy ... ..	52		18	
Malaria ... ..	179		124		Beri beri ... ..	4		3	
Papatacis fever... ..	25		—		Malta fever ... ..	28		3	
Influenza ... ..	193		18		Dengue ... ..	4		—	
Parotitis ... ..	199		16		Bilious fever ... ..	5		4	
Erysipelas ... ..	356		87		3 days' fever ... ..	34		—	
Whooping cough ... ..	478		112		7 days' fever ... ..	39		—	
Anthrax ... ..	19		8						

(b) PLAGUE.

In 1913 a marked declension in the plague incidence was recorded. A still greater reduction in the incidence of the disease took place in 1914, the total being 219 cases, as against 654 during the previous year.

The number of cases per outbreak remains practically the same.

Of the twenty-five cases of pneumonic plague recorded, twenty-one occurred in one village in Upper Egypt.

There is a notable reduction in the number of localities infected, the total being 39 in 1914, as against 117 in 1913.

The usual statistical tables are given below :—

TABLE XXV.—DETAILS OF PLAGUE CASES IN 1914.

TOWN OR DISTRICT.	GOVERNORATE OR PROVINCE.	Existing.	NEW CASES.			Deaths in Hospital.	Cured.	Remaining.	DEATHS OUT OF HOSPITAL.			TOTAL.
			Bubonic.	Septicæmic.	Pneumonic.				Bubonic.	Septicæmic.	Pneumonic.	
Egyptians.												
Alexandria ...	—	—	24	—	—	11	13	—	—	—	1	25
Damietta ...	—	—	1	—	—	—	1	—	—	—	—	1
Port Said ...	—	—	35	—	—	9	25	1	9	—	—	44
Ismailia ...	—	—	1	—	—	1	—	—	—	—	—	1
Tanta ...	Gharbîa ...	—	6	—	—	—	6	—	2	—	—	8
Zifta ...	” ...	—	4	—	—	2	2	—	—	—	—	4
Borollos ...	” ...	—	1	—	—	—	1	—	—	—	—	1
Mansûra ...	Daqahlîa ...	—	1	—	—	—	1	—	—	—	—	1
Zagazig ...	Sharqîa ...	—	1	—	—	1	—	—	—	—	—	1
Menûf ...	Menufia ...	—	2	—	—	—	2	—	—	—	—	2
Tala ...	” ...	—	1	—	—	—	1	—	—	—	—	1
El ‘Ayât ...	Giza ...	—	5	—	—	2	3	—	1	1	—	7
Embâba ...	” ...	—	3	—	—	1	2	—	—	—	—	3
Fayûm ...	Fayûm ...	—	4	—	—	—	4	—	1	—	—	5
Etsa ...	” ...	—	6	—	—	1	5	—	3	—	—	9
Sennûres ...	” ...	—	3	—	—	—	3	—	2	1	—	6
Minia... ..	Minia ...	—	15	—	1	5	11	—	1	—	2	19
Samallût ...	” ...	—	—	—	—	—	—	—	1	—	—	1
Abu Qurqâs ...	” ...	—	14	—	—	6	8	—	3	1	—	18
Fashm... ..	” ...	—	1	—	—	—	1	—	—	—	—	1
Carried forward ... ..	—	—	128	—	1	39	89	1	23	3	3	158



TABLE XXV.—DETAILS OF PLAGUE CASES IN 1914 (*continued*).

TOWN OR DISTRICT.	GOVERNORATE OR PROVINCE.	Existing.	NEW CASES.			Deaths in Hospital.	Cured.	Remaining.	DEATHS OUT OF HOSPITAL.			TOTAL.
			Bubonic.	Septicemic.	Pneumonic.				Bubonic.	Septicemic.	Pneumonic.	
Egyptians.												
Brought forward...	...	—	128	—	1	39	89	1	23	3	3	158
Manfalût ...	Assiût ...	—	—	—	—	—	—	—	—	1	—	2
Deirût ...	„ ...	—	—	1	—	1	—	—	1	1	—	2
Mallâwi ...	„ ...	—	8	—	—	1	7	—	—	—	—	9
Deshna ...	Qena ...	—	1	1	17	19	—	—	1	1	4	24
TOTAL ...		—	137	2	18	60	96	1	25	6	7	195
Foreigners.												
Alexandria ...	Governorate	—	17	1	—	11	7	—	—	—	—	18
Port Said ...	„	—	6	—	—	2	4	—	—	—	—	6
TOTAL ...		—	23	—	—	13	11	—	—	—	—	24
GRAND TOTAL ...		—	160	3	18	73	107	1	25	6	7	219

Number of cases, 219 ; number of deaths, 111 ; number of cured, 107 ; under treatment, 1.

TABLE XXVI.—NUMBER OF CASES AND DEATHS OF PLAGUE.

Town or District.	Province.	Cases.	Deaths.
Alexandria Governorate ...	—	43	23
Damietta „ ...	—	1	—
Port Said „ ...	—	50	20
Ismailia „ ...	—	1	1
Tanta ...	Gharbia ...	8	2
Zifta ...	„ ...	4	2
Borollos ...	„ ...	1	—
Mansûra ...	Daqahlia ...	1	—
Zagazig ...	Sharqia ...	1	1
Menûf ...	Menufia ...	2	—
Tala ...	„ ...	1	—
El ‘Ayât... ..	Gîza ...	7	4
Embaba ...	„ ...	3	1
Fayûm ...	Fayûm ...	5	1
Etsa... ..	„ ...	9	4
Sennûres ...	„ ...	6	3
Minia ...	Minia ...	19	8
Samallût... ..	„ ...	1	1
Abu Qurqâs ...	„ ...	18	10
Fashn ...	„ ...	1	—
Manfalût ...	Assiût ...	2	2
Deirût ...	„ ...	2	2
Mallâwi ...	„ ...	9	2
Luxor ...	Qena ..	24	24
TOTAL ...		219	111

TABLE XXVII.—MONTHLY INCIDENCE OF CASES AND DEATHS OF PLAGUE.

GOVERNORATE OR PROVINCE.	JANUARY.		FEBRUARY.		MARCH.		APRIL.		MAY.		JUNE.		JULY.		AUGUST.		SEPT.		OCTOBER.		NOVEMBER.		DECEMBER.		TOTAL.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Alexandria Governorate ... ..	—	—	1	1	—	—	—	—	1	1	8	4	15	6	11	7	4	3	1	—	2	—	—	1	43	23
Damietta " ... ..	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—
Port Said " ... ..	—	—	3	2	—	—	4	1	1	1	4	3	15	7	4	1	11	1	4	2	3	1	1	1	50	20
Ismailia " ... ..	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1	1
Gharbía Province ... ..	7	2	—	—	1	—	1	1	—	—	—	—	1	—	3	1	—	—	—	—	—	—	—	—	13	4
Daqahlia " ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Sharqía " ... ..	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	1	1
Menufía " ... ..	—	—	—	—	1	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	3	—
Gíza " ... ..	—	—	—	—	—	—	—	—	5	2	5	3	—	—	—	—	—	—	—	—	—	—	—	—	10	5
Fayûm " ... ..	—	—	1	—	—	—	5	2	6	4	3	1	4	1	1	—	—	—	—	—	—	—	—	—	20	8
Minia " ... ..	2	2	—	—	—	—	1	1	27	12	8	4	1	—	—	—	—	—	—	—	—	—	—	—	39	19
Assiût " ... ..	1	1	—	—	—	—	2	2	5	2	5	1	—	—	—	—	—	—	—	—	—	—	—	—	13	6
Qena " ... ..	—	—	—	—	—	—	—	—	22	22	—	—	—	—	—	—	—	—	2	2	—	—	—	—	24	24
GRAND TOTAL ... ..	10	5	5	3	3	—	14	7	67	44	35	17	38	15	19	9	15	4	7	4	5	1	1	2	219	111
Percentage to Grand Total ... ..	4.6	4.5	2.3	2.7	1.4	—	6.4	6.3	30.6	39.6	15.9	15.3	17.4	13.5	8.7	8.1	6.8	3.6	3.2	3.6	2.3	0.9	0.5	1.8	—	—
TOTAL OF LOWER EGYPT ... ..	7	2	4	3	3	—	6	2	2	2	14	8	33	14	18	9	15	4	5	2	5	1	1	2	113	49
Percentage to Total of Lower Egypt ... ..	6.2	4.1	3.5	6.1	2.7	—	5.3	4.1	1.8	4.1	12.4	16.3	29.2	28.6	15.8	18.4	13.3	8.2	4.4	4.1	4.4	2.0	0.9	4.1	—	—
TOTAL OF UPPER EGYPT ... ..	3	3	1	—	—	—	8	5	65	42	21	9	5	1	1	—	—	—	2	2	—	—	—	—	106	62
Percentage to Total of Upper Egypt ... ..	2.8	4.8	0.9	—	—	—	7.5	8.1	61.3	67.7	19.8	14.5	4.7	1.6	0.9	—	—	—	1.9	3.2	—	—	—	—	—	—

TABLE XXVIII.—RECAPITULATION OF PLAGUE STATISTICS, 1899-1914.

Year.	Cases.*	Deaths.*	Deaths per Cent.
1899 ... ..	93	45	48·0
1900 ... ..	127	60	47·2
1901 ... ..	205	102	49·5
1902 ... ..	481	291	60·0
1903 ... ..	303	160	52·7
1904 ... ..	854	501	58·6
1905 ... ..	266	181	68·0
1906 ... ..	631	475	75·2
1907 ... ..	1,253	914	72·9
1908 ... ..	1,511	780	51·6
1909 ... ..	513	207	40·5
1910 ... ..	1,238	615	49·7
1911 ... ..	1,656	1,041	62·9
1912 ... ..	884	441	49·9
1913 ... ..	654	304	46·5
1914 ... ..	219	111	50·7
TOTAL ... ..	10,888	6,228	57·2

TABLE XXIX.—COMPARATIVE STATISTICS, 1911-1914.

Year.	Localities Infected.	Total Cases.	Percentage of Cases per Outbreak.	Pneumonic Cases.	Deaths.	Mortality Rate per Cent.
1911 ... ..	153	1,656	10·8	178	1,041	62·9
1912 ... ..	139	884	6·4	114	441	49·9
1913 ... ..	117	654	5·56	52	304	46·5
1914 ... ..	39	219	5·35	25	111	50·7

\* Including deaths out of hospital.



TABLE XXX.—MOVEMENT OF PLAGUE BY MONTH FOR 1912, 1913, AND 1914.

MONTH.	1912.					1913.					1914.				
	Existing.	Admissions.	Died.	Recovered.	Died out of Hospital.	Existing.	Admissions.	Died.	Recovered.	Died out of Hospital.	Admissions.	Died.	Recovered.	Died out of Hospital.	Remaining.
January ...	2	12	5	7	9	9	22	9	14	10	5	—	3	5	—
February ...	—	75	33	13	18	—	25	10	14	12	3	1	3	2	—
March ...	—	83	44	46	14	—	70	22	37	23	3	—	1	—	—
April ...	—	121	44	52	19	—	111	52	54	21	11	4	5	3	—
May... ..	—	202	71	129	39	—	99	30	65	20	53	30	20	14	—
June ...	—	113	50	91	34	—	79	18	67	9	29	11	17	6	—
July ...	—	31	12	33	3	—	41	15	40	10	34	11	24	4	—
August ...	—	19	7	16	1	—	24	10	12	6	19	9	11	—	—
September ...	—	25	3	18	3	—	20	3	25	3	14	3	9	1	—
October ...	—	9	2	15	2	—	26	7	13	9	5	2	11	2	—
November ...	—	17	7	4	6	—	7	2	12	2	4	—	2	1	—
December ...	—	22	8	12	7	—	5	1	6	—	1	2	1	—	1
ANNUAL TOTAL ...	2	729	286	436	155	9	529	179	359	125	181	73	107	38	1

	1912.		1913.		1914.	
	729	—	529	—	181	—
Admissions to Hospital ...	—	—	—	—	—	—
Deaths in Hospital ...	—	286	—	179	—	73
Percentage of deaths in Hospital to admissions	—	—	—	—	—	40·3
Deaths out of Hospital ...	155	155	125	125	38	38
TOTAL OF CASES...	884	—	654	—	219	—
TOTAL OF DEATHS...	—	441	—	304	—	111

(c) MALARIA.

The following table shows the number of cases of this disease which have come under the notice of the Administration during the year :—

TABLE XXXI.—MALARIA CASES NOTIFIED.

Beheira Mudiria	...	...	...	...	...	...	10
Gharbia "	...	...	...	...	...	...	28
Daqahlia "	...	...	...	...	...	...	10
Sharqia "	...	...	...	...	...	...	9
Menufia "	...	...	...	...	...	...	53
Qaliûbia "	...	...	...	...	...	...	23
Fayûm "	...	...	...	...	...	...	5
Minia "	...	...	...	...	...	...	9
Baharia Oasis	...	...	...	...	...	...	77
Assiût Mudiria	...	...	...	...	...	...	9
Kharga Oasis	...	...	...	...	...	...	48
Dakhla Oasis	...	...	...	...	...	...	30
Qena Mudiria	...	...	...	...	...	...	140
Aswân "	...	...	...	...	...	...	38
Port Said	...	...	...	...	...	...	4
Suez	...	...	...	...	...	...	89
Alexandria (Police)	...	...	...	...	...	...	4
Siwa Oasis	...	...	...	...	...	...	334
TOTAL							920

It is to be noted that all the cases in Qena and Aswân, the two southernmost Mudirias, were imported in the persons of labourers returning from public works in the Sudan.

The four cases notified at Port Said were also all imported from that place, three of them being soldiers of the detachment of the Indian army stationed there.

The anti-anopheles mosquito campaign at Suez has been continued.

That undertaken at Siwa Oasis, and referred to in last year's report, did not give good results, and has been dropped.

2.—THE PILGRIMAGE OF 1914-1915.

Owing to the outbreak of war the pilgrimage was practically stopped. Only 493 pilgrimage passports were taken out. After the entry of Turkey into the war, 752 Egyptians temporarily resident in the Hedjaz returned *viâ* Suez. Of these, 465 had ordinary passports, the remainder had none. Forty-seven pilgrims with pilgrim passports and return tickets arrived at Suez.

TABLE XXXII.—REPORT OF PILGRIMS ARRIVING AT SUEZ, 1914-1915.

NAME OF SHIP.	Date of Arrival.	Number of Pilgrims landed.	Traced in 1st week.	Traced in 2nd week.	Traced in 3rd week.	Stayed at Suez.	Entered Suez Hospital.	Pilgrims reported by Urgent Letter.	Total of Pilgrims traced.	Not traced at all.	Died.
Qena ... ..	9-12-1914	631	585	20	—	65	4	16	621	4	6
Missir ... ..	27-12-1914	21	20	—	—	3	1	—	20	—	1
Borollos ... .. (Mamuria)	3-1-1915	127	121	—	—	98	2	—	121	5	1
TOTAL ... ..		779	726	20	—	166	7	16	762	9	8

3.—PASSENGER AND IMMIGRANT CONTROL.

This important work was continued during 1914, and the measure of success with which it was attended will be seen by the detailed tables given below. Over 67,000 passengers and immigrants were dealt with, and all of these, with the exception of approximately three per cent, were traced.



TABLE XXXIII.—STATISTICS OF PASSENGERS WHO LANDED AT ALEXANDRIA

MONTH.	PASSENGERS FOR CAIRO.						PASSENGERS FOR INTERIOR.					
	1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.		
	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.
January ... ..	293	26	91·85	276	3	98·90	79	3	96·35	196	2	99·00
February ... ..	408	32	92·73	186	6	96·88	64	—	100·00	346	3	99·70
March ... ..	1,167	60	95·12	248	4	98·42	235	8	96·71	284	3	98·96
April ... ..	485	26	94·90	230	7	97·05	58	1	98·41	189	1	99·48
May... ..	261	13	95·30	236	5	97·94	85	3	96·60	227	2	99·14
June ... ..	163	10	94·12	179	3	98·34	82	1	98·80	346	2	99·43
July... ..	368	39	90·25	321	12	96·37	171	2	98·84	1,139	3	99·76
August ... ..	410	21	95·00	353	15	96·00	256	2	99·24	159	1	99·38
September ... ..	525	22	96·00	298	3	99·00	296	8	97·34	239	—	100·00
October ... ..	337	—	100·00	219	1	99·55	156	—	100·00	140	—	100·00
November ... ..	55	—	100·00	107	2	98·17	45	—	100·00	100	—	100·00
December ... ..	203	2	99·00	166	—	100·00	64	—	100·00	123	1	99·20
TOTAL ... ..	4,675	251	94·90	2,819	61	97·88	1,591	28	98·28	3,488	18	99·49

TABLE XXXIV.—DETAILED STATISTICS OF PASSENGERS WHO LANDED AT PORT SAID

MONTH.	CAIRO.												ALEXANDRIA.												INTE					
	ORDINARY PASSENGERS.						TRANSIT PASSENGERS.						ORDINARY PASSENGERS.						TRANSIT PASSENGERS.						ORDINARY PASSENGERS.					
	1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.		
	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.
January ... ..	191	33	85·26	201	26	88·10	7	1	87·5	2	—	100·00	37	1	97·36	33	1	97·05	29	1	96·66	—	—	—	35	—	100·00	202	1	99·50
February ... ..	210	41	83·66	157	19	89·20	7	—	100·00	10	—	100·00	17	3	85·00	14	5	73·68	47	—	100·00	6	—	100·00	96	7	93·2	1,632	5	99·69
March ... ..	206	60	77·44	166	13	92·73	9	—	100·00	20	—	100·00	38	1	97·43	43	1	97·72	40	—	100·00	6	—	100·00	31	2	93·93	128	10	92·75
April... ..	579	47	92·49	466	53	89·78	16	1	94·11	16	—	100·00	64	7	90·14	95	8	92·25	80	1	98·76	6	5	54·54	55	2	96·49	1,357	34	97·55
May ... ..	195	32	85·90	294	22	93·03	22	—	100·00	23	—	100·00	42	3	93·33	21	5	80·76	24	—	100·00	4	—	100·00	26	2	92·85	128	14	90·14
June ... ..	155	23	87·07	356	17	95·44	2	—	100·00	18	—	100·00	42	7	85·71	50	2	96·15	17	—	100·00	3	—	100·00	109	2	98·19	2,743	12	99·60
July ... ..	462	31	93·69	415	27	93·89	12	—	100·00	6	—	100·00	52	9	85·27	55	10	84·61	24	—	100·00	10	—	100·00	250	2	99·20	782	30	96·30
August ... ..	445	21	95·49	261	25	91·25	13	—	100·00	7	—	100·00	74	11	87·05	40	11	78·43	11	—	100·00	13	—	100·00	141	7	95·27	182	11	94·30
September ... ..	566	16	97·25	372	18	95·38	4	—	100·00	3	—	100·00	50	6	89·28	51	2	96·22	3	—	100·00	—	—	—	228	1	99·56	300	1	99·66
October ... ..	322	8	97·57	263	13	95·29	1	—	100·00	—	—	—	27	—	10·00	10	1	90·90	1	—	100·00	—	—	—	80	1	98·76	119	3	95·08
November ... ..	109	3	97·32	30	2	93·75	—	—	—	—	—	—	55	2	96·49	3	—	100·00	1	—	100·00	—	—	—	42	—	100·00	27	1	96·42
December ... ..	20	—	100·00	14	1	93·33	—	—	—	—	—	—	3	—	100·00	2	—	100·00	—	—	—	—	—	—	9	—	100·00	1	—	100·00
TOTAL ... ..	3,460	315	91·65	2,995	236	92·69	93	2	97·89	105	—	100·00	501	50	90·92	417	46	90·06	277	2	99·28	48	5	90·56	1,102	26	97·69	7,601	122	98·42



FROM SHIPS COMING FROM CHOLERA-INFECTED COUNTRIES DURING THE YEAR 1914.

PASSENGERS REMAINED AT ALEXANDRIA.						TRANSIT PASSENGERS.						TOTAL.					
1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.		
Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.
462	9	98·09	1,593	5	99·69	25	1	96·16	61	1	98·39	859	39	95·67	2,126	11	99·49
462	1	99·79	1,609	—	100·00	45	1	97·83	61	2	96·83	979	34	96·65	2,202	11	99·51
584	5	99·15	1,893	15	99·22	72	1	98·64	117	1	99·16	2,058	74	96·53	2,542	23	99·14
493	8	98·40	1,645	6	99·64	15	18	45·46	134	10	93·06	1,051	53	95·20	2,198	24	98·92
467	2	99·58	1,876	5	99·73	45	11	80·00	88	11	89·00	858	29	96·74	2,427	23	99·07
531	7	98·71	1,678	2	99·89	28	5	84·85	339	5	98·64	804	23	97·25	2,542	12	99·52
679	8	98·83	2,167	16	99·24	76	18	80·00	588	13	97·84	1,294	67	95·03	4,215	44	98·97
762	9	98·84	1,293	4	99·70	45	3	94·00	120	5	95·84	1,473	35	97·67	1,925	25	98·72
845	3	99·65	1,270	18	98·61	47	1	98·00	208	3	98·57	1,713	34	98·10	2,015	24	98·83
602	—	100·00	1,182	—	100·00	21	—	100·00	21	—	100·00	1,116	—	100·00	1,562	1	99·94
240	—	100·00	2,434	2	99·92	16	—	100·00	29	1	96·67	356	—	100·00	2,670	5	99·82
638	—	100·00	587	1	99·83	6	—	100·00	18	—	100·00	911	2	99·78	894	2	99·77
6,765	52	99·24	19,227	74	99·62	441	59	88·20	1,784	52	97·18	13,472	390	97·19	27,318	205	99·26

Total number of passengers ... .. 41,385  
" " " found ... .. 40,790 (including passengers sent to "Chatby Observation Camp" or "Hospital").  
" " " not found ... .. 595  
Percentage of passengers found ... .. 98·57 per cent.

FROM SHIPS COMING FROM CHOLERA-INFECTED COUNTRIES DURING THE YEAR 1914.

RIOR.						PORT SAID.												TOTAL.												TOTAL WITHOUT CLASSIFICATION.		
TRANSIT PASSENGERS.						ORDINARY PASSENGERS.						TRANSIT PASSENGERS.						ORDINARY PASSENGERS.						TRANSIT PASSENGERS.								
1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.			1st and 2nd Class.			3rd Class.					
Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.	Found.	Not Found.	Percentage Found.
1	—	100·00	—	—	—	152	1	99·34	526	3	99·24	36	—	100·00	27	—	100·00	415	35	92·22	962	31	96·87	73	2	97·33	29	—	100·00	1,479	68	95·60
—	—	—	—	—	—	79	6	92·94	461	5	98·92	27	—	100·00	53	—	100·00	402	57	87·58	2,264	34	98·52	81	—	100·00	69	—	100·00	2,816	91	96·86
—	—	—	—	—	—	108	4	96·42	529	9	98·32	93	—	100·00	91	—	100·00	383	67	85·12	866	33	96·32	142	—	100·00	117	—	100·00	1,508	100	93·78
1	—	100·00	1	—	100·00	93	9	91·17	511	6	95·83	40	4	90·9	108	—	100·00	111	65	92·40	2,429	101	96·00	137	6	95·80	131	5	96·32	3,488	177	95·17
—	—	—	2	—	100·00	84	4	95·45	586	8	98·65	28	—	100·00	60	—	100·00	347	41	89·43	1,029	49	95·45	71	—	100·00	89	—	100·00	1,539	90	94·47
1	—	100·00	—	—	—	76	5	95·06	575	2	98·65	36	—	100·00	68	—	100·00	382	37	91·16	3,724	33	99·12	56	—	100·00	89	—	100·00	4,251	70	98·38
2	—	100·00	—	—	—	198	11	94·73	1,149	13	98·88	52	—	100·00	55	—	100·00	962	53	94·77	2,401	80	96·85	90	—	100·00	71	—	100·00	3,524	133	96·36
—	—	—	—	—	—	133	19	87·5	590	6	98·98	30	—	100·00	22	—	100·00	793	58	93·17	1,073	53	95·29	54	—	100·00	42	—	100·00	1,962	111	94·64
—	—	—	—	—	—	193	7	96·5	603	9	98·52	77	—	100·00	39	—	100·00	1,037	30	97·18	1,326	30	97·77	84	—	100·00	42	—	100·00	2,489	60	97·64
—	—	—	—	—	—	106	—	100·00	279	—	100·00	9	—	100·00	20	—	100·00	535	9	98·34	671	17	97·67	11	—	100·00	20	—	100·00	1,237	26	97·94
—	—	—	—	—	—	100	—	100·00	75	—	100·00	8	—	100·00	—	—	—	306	5	98·39	135	3	97·82	9	—	100·00	—	—	100·00	450	8	98·25
—	—	—	—	—	—	50	—	100·00	25	—	100·00	—	—	100·00	—	—	—	82	—	100·00	42	1	97·67	—	—	—	—	—	—	124	1	99·2
5	—	100·00	3	—	100·00	1,372	66	95·41	5,909	61	98·97	436	4	99·09	543	—	100·00	6,435	459	93·34	16,922	465	97·32	811	8	99·02	699	5	99·25	24,867	935	96·37

TABLE XXXV.—REPORT OF PASSENGERS ARRIVING AT SUEZ.

MONTH.								Number of Passengers.	Traced.	Not Traced.	Percentage of Traced.
January ...	...	...	...	...	...	...	...	216	207	9	95
February ...	...	...	...	...	...	...	...	317	313	4	99
March ...	...	...	...	...	...	...	...	201	194	7	96
April ...	...	...	...	...	...	...	...	301	294	7	97
May... ..	...	...	...	...	...	...	...	274	261	13	95
June ...	...	...	...	...	...	...	...	127	123	4	97
July ...	...	...	...	...	...	...	...	324	309	15	95
August ...	...	...	...	...	...	...	...	132	121	11	91
September ...	...	...	...	...	...	...	...	150	148	2	99
October ...	...	...	...	...	...	...	...	223	220	3	98
November ...	...	...	...	...	...	...	...	12	12	—	100
December ...	...	...	...	...	...	...	...	15	15	—	100
TOTAL ... ..								2,292	2,217	75	97

TABLE XXXVI.— SHIPS AND SAILORS ARRIVING AT DAMIETTA.

PORT OF ORIGIN.				Ships.	Sailors.	PORT OF ORIGIN.				Ships.	Sailors.
El Alaya ...	...	...	...	74	514	<i>Brought forward</i> ...				274	1,881
Jaffa ...	...	...	...	76	499	Cyprus ...	...	...	...	43	251
Beyrut ...	...	...	...	4	24	Haifa ...	...	...	...	5	35
Akka ...	...	...	...	4	19	Tripoli (Syria) ...	...	...	...	1	6
Nammur ...	...	...	...	34	238	Abu Zayoura ...	...	...	...	4	25
Adalia... ..	...	...	...	53	383	Selefka ...	...	...	...	7	47
Feteikka ...	...	...	...	13	91	Ghaza ...	...	...	...	4	23
Sur ...	...	...	...	15	103	Saida ...	...	...	...	3	13
El Deiba ...	...	...	...	1	10	TOTAL ... ..				341	2,281
<i>Carried forward</i> ...				274	1,881						

TABLE XXXVII.—DAMIETTA : MONTHLY NUMBER OF SHIPS AND SAILORS.

MONTH.				Ships.	Sailors.
January ...	...	...	...	1	12
February ...	...	...	...	1	7
March... ..	...	...	...	2	12
April ...	...	...	...	12	77
May ...	...	...	...	31	217
June ...	...	...	...	44	302
July ...	...	...	...	79	504
August ...	...	...	...	55	366
September ...	...	...	...	54	359
October ...	...	...	...	41	285
November ...	...	...	...	21	140
December ...	...	...	...	—	—
TOTAL ... ..				341	2,281

#### 4.—VACCINATION.

The table below shows the successful vaccinations and revaccinations which were effected :—

TABLE XXXVIII.

	SUCCESSFUL VACCINATIONS.		SUCCESSFUL REVACCINATIONS.	
	1912-1913.	1913-1914.	1912-1913.	1913-1914.
November and December ...	77,286	79,958	501	420
January 1 to October 31 ...	392,921	374,418	2,520	3,241
TOTAL ...	470,207	454,376	3,021	3,661

Returns of 2,091 cases from 796 villages in 1912-1913, and 2,921 cases from 844 villages in 1913-1914, had not been received to the end of the year.

#### 5.—MULIDS.

During the first eight months of the year (January to August) the Department gave its opinion regarding the holding of about 150 *Mulids*, the period of celebration of which varied from three to fifteen days each. Subsequent to the outbreak of war, however, the Ministry of the Interior issued a circular on August 27 by which the celebration of *Mulids* was forbidden. The big *Mulids* usually held every year at Tanta and Desûq were therefore not celebrated.

#### 6.—BARBERS.

##### (a) SPECIALLY TRAINED IN "FIRST AID."

Up to the month of September, when the work was suspended, 209 barbers were trained in first aid work. Of this number, 195 passed the examination, and most of these successful candidates have been appointed as sanitary barbers in the villages.

One hundred and thirty-four "First Aid Sets" were issued.

##### (b) ORDINARY TRAINING.

Two hundred and eighty-eight sanitary barbers were appointed in different parts of the country during the year, forty-one being exempted from military service on their appointment in virtue of Article 15, Chapter IV, of the Recruiting Law of 1902.



## V.—REPORT ON SCIENTIFIC INSTITUTES.

### 1.—HYGIENIC INSTITUTE.

The erection and furnishing of the new first floor of the Institute was completed early in the year, and as soon as this work was finished the ground floor was partially rearranged, two of the rooms being fitted as chemical laboratories for the analysis of water and foodstuffs.

Minor alterations, with a view to providing suitable storage for instruments, chemicals, etc., are at present in progress and will shortly be completed.

The practical absence of any accommodation for animals is a serious handicap to experimental work, and it is very desirable that such accommodation should be provided as soon as possible. A scheme for the provision of this was drawn up last year, but, for financial reasons, was postponed.

On the transference of the Veterinary Service of the Department of Public Health to the Ministry of Agriculture at the beginning of the year the Vaccine Institute was attached to the Hygienic Institute and a bacteriologist on the staff of the latter Institute placed in charge of the preparation and control of the vaccine.

During the latter part of the year the personnel of the various institutes has been considerably affected by the European war, particularly in the case of the Antirabic Institute, through the regrettable death of M. Soulanet, *préparateur*, who was killed at the front, and by the absence of Dr. Bain, the director, who is engaged in Red Cross work in France.

Under these circumstances the work of the Antirabic Institute has had to be carried on by the staff of the Hygienic Institute.

The following is a summary of the work carried out in the Institute :—

#### (a) BACTERIOLOGICAL SECTION.

Examinations made in the routine work connected with the diagnosis of infectious and epidemic diseases.

TABLE XXXIX.

	Number of Specimens Examined.	Number of Cases found Positive.
Plague ... ..	302	36
Cholera ... ..	18	—
Diphtheria... ..	817	268
Typhoid fever (agglutination test) ... ..	494	115
Paratyphoid B. ( " ) ... ..	455	13
Malta fever ( " ) ... ..	466	21
Malaria and relapsing fevers... ..	1,481	308 (Malaria). 41 (Relapsing).
Blood films of cattle examined for piroplasmata ... ..	852 bulls	145 (Texas fever). 93 (Egypt fever).
Gonorrhœa... ..	329	108
Vaccine ... ..	50	
Miscellaneous ... ..	645	
	5,909	
Under the supervision of the Hygienic Institute at the Infectious Diseases Hospital ... ..	4,826	

The diagnosis of plague is made from Agar tubes inoculated with the suspected materials, but since the month of April, in addition to these cultures, films from the bubos, lungs, and heart's blood have also been examined.

The plague diagnosis has involved the examination of 298 cultures and 693 films.

Under the heading "Miscellaneous" are included the examination of sputa for tubercle bacilli, etc., cerebro-spinal fluid, fæces for typhoid, paratyphoid, and dysentery bacilli, goats' blood for *M. melitensis*, examination for anthrax bacillus, and various animal experiments.

A large increase has taken place in the number of specimens examined for malaria parasites, 1,481 specimens having been received during the year, in comparison with 819 specimens during the previous year. The percentage of positive results remains approximately the same, and the larger number of specimens sent to the laboratory cannot be taken as an indication of an extension of the disease.

For the control of water supplies the following bacteriological examinations have been carried out during the year:—

TABLE XL.

	Number of Samples.	Number of Plates for Ordinary Bacteria.	Number of Plates for <i>B. Coli.</i>
Cairo :—			
Rod el Farag supply :—raw, decanted, and filtered water taken at the works ...	2,003	3,720	294
Taken in the town ... ..	317	634	—
Giza supply ... ..	367	630	208
Me'âdi supply ... ..	460	920	920
Zeitun and Heliopolis supplies ... ..	20	40	40
Beni Suef supply ... ..	16	16	16
Zagazig " ... ..	28	56	56
Tanta " ... ..	7	7	10
Damanhûr " ... ..	23	23	2
TOTAL ... ..	3,241	6,046	1,580

For several years the trapping of rats has been carried out in the non-plague infected districts of the Delta and Upper Egypt which are within reasonable distance by rail from Cairo and the rats sent to the Hygienic Institute for identification of the species. This work has now been discontinued, but the results are of considerable interest especially in connection with the special plague investigations carried out by the Department in 1912 and 1913 in Upper Egypt.

Altogether 5,653 rats were examined, with the following results:—

TABLE XLI.

RATS BROUGHT FROM	MUDIRIA.	Number of <i>Mus Rattus.</i>	Number of <i>Mus Decumanus.</i>	Percentage of <i>Mus Decumanus.</i>
Damanhûr ... ..	Beheira ... ..	262	995	79·15
Kafr el Dawâr ... ..	" ... ..	24	63	72·41
El 'Atf ... ..	" ... ..	13	57	81·43
Abu Hommos ... ..	" ... ..	13	29	69·00
Kafr el Sheikh ... ..	Gharbîa ... ..	50	83	62·40
Fûa ... ..	" ... ..	146	3	2·00
Rosetta ... ..	" ... ..	69	—	—
Desûq ... ..	" ... ..	18	114	86·36
Samannûd ... ..	" ... ..	114	—	—
Mahalla el Kubra ... ..	" ... ..	109	3	2·68
Mansûra ... ..	Daqahliâ ... ..	279	254	47·65
Faraskûr ... ..	" ... ..	125	20	13·80
Carried forward ... ..		1,222	1,621	



TABLE XLI (*continued*).

RATS BROUGHT FROM	MUDIRIA.	Number of <i>Mus Rattus</i> .	Number of <i>Mus Decumanus</i> .	Percentage of <i>Mus Decumanus</i> .
<i>Brought forward...</i>		1,222	1,621	
Zagazig ... ..	Sharqia ... ..	219	213	49·30
Tell el Kebîr ... ..	" ... ..	235	—	—
Bilbeis... ..	" ... ..	216	—	—
Qassassîn ... ..	" ... ..	140	68	32·6
Ismailia ... ..	Port Said ... ..	247	22	8·00
Suez ... ..	Suez ... ..	—	280	100·00
Damietta ... ..	Damietta ... ..	298	42	12·35
Old Cairo ... ..	Cairo ... ..	113	—	—
Sayeda Zenab ... ..	" ... ..	95	—	—
Bulâq ... ..	" ... ..	54	—	—
Rôd el Farag ... ..	" ... ..	423	92	17·86
Khalîfa ... ..	" ... ..	68	—	—
'Ezbet Eriân bey ... ..	" ... ..	18	11	38·00
Demerdâsh... ..	" ... ..	19	14	42·40
Shubra ... ..	" ... ..	387	67	14·75
Helwân ... ..	" ... ..	446	—	—
Sâhel Atar el Nabi ... ..	" ... ..	167	22	11·64
Ma'sâra ... ..	" ... ..	95	14	12·90
Me'âdi el Khabîry ... ..	" ... ..	56	—	—
Tura ... ..	" ... ..	186	—	—
Embâba ... ..	Giza ... ..	54	—	—
Giza ... ..	" ... ..	162	353	68·70
Beni Suef ... ..	Beni Suef ... ..	284	54	16·00
Aswân ... ..	Aswân ... ..	449	—	—
TOTAL ... ..		5,653	2,873	33·69

It is interesting to notice in the above table that in the quarters of Cairo examined (*viz.* Old Cairo, Sayeda Zenab, Bulâq, Khalîfa, and Rôd el Farag) no single specimen of *Mus Decumanus* was found, except in Rôd el Farag where the trapping was done in the warehouses adjoining the landing stages for the Nile boats.

*Anti-Scorpion Serum.*—During the year 152 reports were received on the use of anti-scorpion serum. The results of all the reports received since this serum was first used in 1906 are as follows :—

TABLE XLII.

AGE.	Total Number of Patients Treated.	Number of Deaths.	Percentage of Deaths.
From 0 to 5 years ... ..	135	24	17·77
" 6 to 10 " ... ..	109	6	5·50
" 11 to 15 " ... ..	67	1	1·49
" 16 to 20 " ... ..	62	1	1·61
Over 20 years ... ..	249	—	—
Cases for which no age was given ... ..	16	—	—
TOTAL ... ..	639	32	5

The results following the use of the serum are very satisfactory, but there is reason to believe that in many cases where the serum is used no report is sent. If all the cases were reported the results would probably be more favourable, as it is naturally the milder cases which escape record.

*Cattle Plague.*—The experiments on cattle plague which were undertaken by two members of the staff of the Institute on behalf of the Commission nominated by the Council



of Ministers in 1912 were continued until March 31, 1914, the termination of the financial year, up to which date the necessary funds were available. At the request of the Commission these experiments were directed primarily to certain points having an important bearing on the practical measures necessary for dealing with the epidemic, such as the methods of transmission of the disease, infectivity of the hides, meat, etc.

The results of this work, which were published in the course of the year, have given very valuable information on many of these points.

In the work of the Serum Institute, for the preparation of cattle plague serum and the provision of virulent blood for use in the districts, considerable difficulties have been met with from the infection of the cattle imported from Cyprus with the parasites of Texas fever. This has necessitated the microscopical examination of all the blood used and has taken up practically the whole time of one man, 1,726 blood films having been examined in the course of the year. Of this number, 145 were found to be infected with the parasites of Texas fever and 93 with those of Egyptian fever.

### (b) CHEMICAL SECTION.

The following chemical analyses have been performed during 1914 :—

Milk...	...	...	...	...	...	...	...	...	...	...	...	...	1,079
Butter and <i>samna</i>	...	...	...	...	...	...	...	...	...	...	...	...	85
Water	...	...	...	...	...	...	...	...	...	...	...	...	126
<i>Manzûl</i> , <i>ma'gûn</i> , <i>halâwa</i> , etc.	..	...	...	...	...	...	...	...	...	...	...	...	338
Drugs and pharmacopœial preparations	...	...	...	...	...	...	...	...	...	...	...	...	128
Miscellaneous...	...	...	...	...	...	...	...	...	...	...	...	...	72
													1,828

A paper was published during the year by the Department describing a series of analyses performed at the Hygienic Institute on a number of samples of buffalo milk known to be genuine.

From the results obtained provisional standards were established for the composition of normal buffalo milk in Egypt, and a control of the Cairo milk supply has been instituted.

Ten samples of milk are purchased daily from vendors in the various *qisms*, the samples being taken under the supervision of the medical officer of the *qism*. The milk is examined at the laboratories and the results of the analysis communicated to the Cairo Inspectorate.

990 samples of milk have been purchased in this way during the year, of which 910 were buffalo milk, 25 cow milk, 3 goat milk, and 52 mixtures of buffalo and cow milk.

The results of the analyses are shown as below :—

	Number.	Percentage.
Genuine ... ..	521	52·6
Adulterated ... ..	469	47·4
Skimmed ... ..	293	29·6
Watered ... ..	99	10·0
Skimmed and watered ... ..	77	7·8

The majority of the remaining 89 samples of milk were sent by the Inspectorate of Pharmacies. Of these, 30 *i.e.* 34 per cent were adulterated.

Of the 85 samples of butter and *samna* examined, 37, *i.e.* 43·5 per cent were adulterated. The chief adulterants used were coconut and cotton seed oils.

The 126 analyses of water performed include the periodical examination of the Rôd el Farag, Gîza, Heliopolis, and Zeitûn water supplies, together with the analyses of a number of samples of well water from various parts of Egypt.

Of the 338 substances examined for the presence of *hashîsh*, 250 (74 per cent) gave positive results.

The miscellaneous examinations performed include the analyses of flour, olive oil, tea, linseed oil, salt, alcohol, wine, beer, brandy, lemonade, burning oil, soap, grease, fertilizers, alum, rat poison.

(c) CENTRIFUGALIZING AND BOTTLING OF CATTLE PLAGUE SERUM.

The crude serum prepared at the Serum Institute at Abbassia is forwarded in ice to the Hygienic Institute, where it is centrifuged, carbolized, and bottled, and then packed and placed in cold storage.

During the year 277,330 doses of 50 c.c. were treated in this way.

On the outbreak of the war an order for 100,000 bottles, which had been placed in Germany, had to be cancelled. After filling all the available bottles, the remaining serum has been temporarily stored in demijohns in cold storage, until the necessary bottles can be obtained elsewhere. 5,364 litres have been treated in this way.

At the end of the year there remained in stock 290,079 doses of 50 c.c. in bottles and 5,364·5 litres of serum unbottled.

To this is to be added 1,435 doses of 50 c.c. of Indian serum.

Publications from the Hygienic Institute during 1914 :—

“The Composition of the Milk of Egyptian Animals,” by A. Pappel and G. Hogan, Cairo, Government Press, 1914.

“*Etudes sur la Dysenterie*,” par L. Avad, *Revue Médicale d’Egypte*, Janvier 1914.

“Experiments on Cattle Plague,” by C. Todd and R. G. White, Cairo, Government Press, 1914.

2.—ANTIRABIC INSTITUTE.

During the year, 686 persons presented themselves for treatment, against 748 last year.

Of these 686 cases, 149 may be deducted, the animals responsible for the injury having been found non-rabid after ten days’ observation. Six patients also voluntarily ceased to attend for treatment.

The net statistics, therefore, concern the following 531 cases :—

Egyptians ... ..	475
Europeans resident in Egypt ... ..	51
From Palestine, Syria, and Abyssinia ... ..	5

The topographical distribution was as follows :—

Cairo Governorate ... ..	66
Alexandria Governorate ... ..	17
Canal Governorate (including Port Said, Ismailia, and Suez) ...	9
Damietta Governorate ... ..	2
Beheira Mudiria ... ..	13
Sharqia „ ... ..	45
Qaliubia „ ... ..	50
Daqahlia „ ... ..	50
Gharbia „ ... ..	90
Menufia „ ... ..	50
Fayûm „ ... ..	8
Beni Suef „ ... ..	12
Giza „ ... ..	25
Minia „ ... ..	17
Assiût „ ... ..	29
Girga „ ... ..	24
Qena „ ... ..	15
Aswân „ ... ..	4
Syria and Palestine ... ..	1
Abyssinia ... ..	3
German East Africa ... ..	1



The injuries were inflicted by : dogs 468, cats 26, donkey 1, wolves 28, camels 2, horses 5, fox 1.

Of the injuries, 57 were on the head, 210 on other uncovered parts, and 221 through clothing.

*Diagnosis.*—Of the 531 cases: (a) 33 were bitten by animals proved to be rabid by microscopical and experimental laboratory research ; (b) 4 were reported positive by the veterinary surgeons of the Alexandria Municipality ; and in (c) 19 other cases the death of the patient (either treated or untreated) was considered positive evidence of rabies.

Of the animals inflicting the bites, 33 were responsible for (a), 4 for (b), and 19 for (c); 22 animals remained suspect, experiments proving inconclusive ; two were considered suspect by veterinary surgeons ; 144, after observation, were found to be healthy ; 88 corpses of animals were received in too advanced a state of putrefaction to allow of investigation ; 191 escaped, and 21 were killed but not forwarded to the laboratory. As regards the remainder, in some cases no information could be obtained ; in others a positive diagnosis was not established either because the animals were healthy or researches are pending.

*Treatment.*—The total mortality amongst the 531 patients treated was eleven (*i.e.* 2·07 per cent), but five of these deaths occurred either during the period of treatment or less than fifteen days after its termination. The remaining six deaths which occurred later than fifteen days after the termination of the treatment give a mortality of 1·12 per cent. These deaths all occurred in persons with severe bites, which, with one exception, were all multiple. Two were cases of wolf bites and two were bitten in the face.

### 3.—VACCINE INSTITUTE.

Up to the beginning of 1914 the production of calf lymph was carried out by the Veterinary Section of the Department of Public Health under scientific control of the Hygienic Institute.

On the transfer of the Veterinary Service to the Ministry of Agriculture the whole work of the Vaccine Institute was taken over by the Hygienic Institute.

The demands for vaccine are steadily increasing, and the amount issued in 1914 was very considerably in excess of previous years, the amounts issued for the last four years being as follows :—

1911	...	...	...	...	...	...	...	...	...	532,836	doses.
1912	...	...	...	...	...	...	...	...	...	576,210	„
1913	...	...	...	...	...	...	...	...	...	771,361	„
1914	...	...	...	...	...	...	...	...	...	1,025,896	„

If the policy of gradually replacing arm-to-arm vaccine by vaccination with calf lymph is adopted—at any rate in the case of the larger Egyptian towns—a very considerable increase in the demand for vaccine must be foreseen and provided for.

During the past year the work of the Institute has been considerably facilitated by the adoption of cold storage, the vaccine after glycerination and keeping for a month at a temperature of 16° C. being placed in cold storage at a temperature of about 2° C. where it is kept until required for use. In this way the preparation of vaccine can be continued without interruption throughout the winter, and a stock is always available to cope with emergencies and for use during the hot months of the summer when the preparation of the vaccine presents considerable difficulties.



The issue for 1914 was made up as follows :—

	Number of Units.
Health Inspectors in Cairo and Provinces ... ..	774,986
Waqfs Ministry and Charitable Institutions ... ..	31,810
Sudan Government ... ..	59,175
Egyptian Army ... ..	14,650
Alexandria Municipality... ..	115,000
Prisons Department... ..	4,685
Ministry of Education ... ..	8,305
Sold to the public ... ..	8,275
Miscellaneous sales ... ..	6,870
Army of Occupation ... ..	2,040
TOTAL ... ..	1,025,896

The receipts from the sale of vaccine amounted to L.E. 407·545 milliemes, but this sum does not include the price of lymph issued to Government Administrations during the first quarter of 1914, *i.e.* before the issue of Departmental Order No. 76 of August 10, 1914, in virtue of which they receive vaccine free of charge from April 1, 1914.

4.—SERUM INSTITUTE.

Consequent on the decision to reduce the number of serum-producing animals in the Institute to 100, the gradual reduction of the numbers was started during the month of September, and at the end of the year the total number of the serum-producing cattle had been reduced to 119.

The following are the figures of the year's work :—

TABLE XLIII.—MONTHLY OUTPUT OF CATTLE PLAGUE SERUM.

	Doses of 50 c.c.	Number of Animals Bled.
January ... ..	16,371	380
February ... ..	26,982	656
March ... ..	36,450	900
April ... ..	37,350	906
May ... ..	34,947	874
June ... ..	32,850	814
July ... ..	32,152·5	774
August ... ..	35,550	848
September ... ..	39,400	691
October ... ..	36,990	559
November ... ..	33,530	461
December ... ..	23,190	289
TOTAL ... ..	385,762·5	8,152

The serum-producing cattle in stock on the first of each month was :—

January ... ..	373
February ... ..	403
March ... ..	429
April ... ..	427
May ... ..	428
June ... ..	426
July ... ..	426
August ... ..	429
September ... ..	414
October ... ..	357
November ... ..	280
December ... ..	195

In addition to bleedings for serum, 327 *baladi* cattle were bled to death for serum owing to the reduction of the Institute.

TABLE XLIV.—CYPRUS CATTLE.

	Bled to Death.	Reinforcements.
January ... ..	70	169
February ... ..	90	282
March ... ..	87	272
April ... ..	87	254
May ... ..	80	229
June ... ..	82	204
July ... ..	91	247
August ... ..	67	185
September ... ..	67	182
October ... ..	55	144
November ... ..	33	91
December ... ..	19	63
TOTAL ... ..	828	2,322

In addition to Cyprus cattle bled to death, eighty litres of virulent blood were received from the Cattle Plague Commission and used for reinforcing.

*Mortality.*

Twenty-three *baladi* cattle died during the year from the following causes :—

Purpura ... ..	7
Toxaemia ... ..	2
Syncope ... ..	8
Tubercle ... ..	3
Texas Fever ... ..	1
Peritonitis ... ..	1
Fatty obstruction ... ..	1

Nine Cyprus cattle died as follows :—

Egyptian Fever ... ..	3
Cattle Plague ... ..	3
Foot-and-mouth disease ... ..	1
Texas Fever ... ..	1
Heat Stroke ... ..	1

Amounts of virulent blood sent to the districts monthly :—

	Doses of 50 c.c.
January ... ..	11,650
February ... ..	3,150
March ... ..	10,350
April ... ..	16,700
May... ..	29,882
June ... ..	31,486
July ... ..	20,813
August ... ..	25
September ... ..	260
October ... ..	387
November ... ..	6
December ... ..	8
TOTAL ... ..	124,717

*Note on Health of Serum-Producing Cattle.*

On January 8 one case of foot-and-mouth disease was detected amongst the serum-producing cattle ; every effort was made to prevent the disease spreading to the remainder by isolation and disinfection.

Several fresh cases occurred on the 9th and following days amongst the cattle that were far removed from the first case. It was then decided to experimentally inject all the remaining cattle so as to shorten the duration of the epidemic as much as possible.

Experimental infection by nose swabbing was done on January 12, 13, and 14. As a result of the nose swabbing only two bulls did not contract the disease out of a total of 454. Within a month, with the exception of a few chronic foot cases, all the cattle recovered.

Amongst the cattle which contracted the disease were fifteen bulls that had the disease in November 1913 whilst in our isolation stables at Gezîra. This conclusively proves that an attack of foot-and-mouth disease gives little or no immunity to a second.

The output of serum during January and February was diminished by approximately 24,000 doses on account of this outbreak.

The origin of the outbreak of foot-and-mouth disease was probably infected forage. No other epidemic occurred at the Institute during the year.

*Health of Cyprus Cattle.*—The health of the Cyprus cattle has been very much the same as in previous years.

No clinical Texas or Egyptian fever has been detected in non-inoculated cattle, but many showed the parasites on blood examination even immediately on arrival in the country.

One herd of our Cyprus cattle was experimentally infected with foot-and-mouth disease whilst the other herd was kept free from the disease.

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## VI.—REPORT ON CAIRO CITY AND PORT SAID TOWN.

### 1.—REPORT OF THE MEDICAL OFFICER OF HEALTH, CAIRO CITY.

#### (a) POPULATION.

The estimated mid-year population of Cairo in 1914 was 725,670 and consisted of 654,795 Egyptians and 70,875 foreigners. The district distribution of the population has been calculated as follows :—

‘Abdîn District, 59,160 ; Bab el Sha‘rîa, 62,627 ; Bulâq, 99,361 ; Darb el Ahmar, 74,435 ; Ezbekîa, 51,615 ; Gamaliâ, 65,478 ; Helwân, 8,477 ; Khalîfa, 59,748 ; Musky, 24,427 ; Old Cairo, 34,879 ; Sayeda Zenab, 72,070 ; Shubra, 54,186 ; and Waily, 59,207.

The district populations, in the absence of data on which to base individual estimates, have, as hitherto, been calculated on the assumption that the general increase for Cairo has been justly apportioned to the various districts. As has been pointed out, however, in previous reports, this method of calculation is liable to error, particularly in outlying districts where rapid suburban growth is likely to lead, in some cases, to disproportionate increase in such districts. In last year’s report attention was drawn, in the case of Waily, to the probability of an appreciable underestimate from this cause, and it is not improbable that the same, in all likelihood, also applies to Shubra. This possible margin of error should therefore always be borne in mind in the consideration of the statistical rates of the various districts, though, generally speaking, the error is unlikely to be sufficiently large to render their acceptance in any case altogether inadmissible.

#### (b) VITAL STATISTICS.

During 1914, 31,314 births occurred in Cairo. The *annual birth-rate* was therefore 43·1 per thousand of the population, as compared with 44·1 in the previous year. For the quinquennial period ending with 1914, the mean annual birth-rate was 44·9, the highest rates during this period being 46·4 in 1910 and the same in 1911, and the lowest that of the present year. This year, as last, the highest district birth-rate was in Shubra, where there were 60·6 births per thousand of the population. The Musky district was the lowest with a rate of 29·7. Relatively to the annual birth-rate of the City as a whole, the various district birth-rates occupied much the same positions as last year, with the exception of Helwân, which last year was below the general city rate and this year is above, and Gamaliâ, in which the reverse condition obtained.

In Table XLV, the annual birth-rates of the various districts in 1914 are shown in comparison with those of 1913.

TABLE XLV.—DISTRICT ANNUAL BIRTH-RATES PER THOUSAND OF POPULATION.

DISTRICT.	Birth-rate in 1914.	Birth-rate in 1913.
Musky... ..	29·7	33·1
Ezbekîa ... ..	32·7	32·4
‘Abdîn... ..	33·1	33·5
Darb el Ahmar... ..	36·0	36·8
Bab el Sha‘rîa ... ..	39·9	43·3
Gamaliâ ... ..	42·5	44·9
Waily ... ..	43·4	44·5
Sayeda Zenab ... ..	44·4	45·1
Helwân ... ..	44·7	37·0
Khalîfa ... ..	45·9	47·6
Bulâq ... ..	50·3	52·6
Old Cairo ... ..	50·8	49·5
Shubra ... ..	60·6	59·3

Of the total births, 30,745 were native births and 569 of foreigners.

During the year there were 1,304 *still-births*, 1,274 being of Egyptian and 30 of foreign parentage. This gives a rate of 4·16 still-births per hundred births, as compared with 4·28 per hundred in 1913. When one remembers the great lack of properly trained assistance in this country, the percentage of still-births is remarkably low and compares favourably with other countries in which compulsory registration renders statistical comparison possible. In Germany, France, and Japan, the rates of still-births per hundred births are 3·3, 5·0, and 9·5 respectively.

During the year a total of 26,707 deaths occurred in Cairo. Of these, however, 579 were irrelevant deaths of non-residents, leaving 26,128 as the year's death-toll of the Cairo population. This gives an *annual death-rate* of 36·0 per thousand of the population, as compared with a rate of 36·9 for the last year. For the quinquennial period ending with the present year, the mean annual rate was 37·5 per thousand with a maximum during this period of 40·3 in 1911 and a minimum exclusive of the present year of 36·9 in 1913.

As was the case last year, the lowest mortality occurred in Ezbekia district, with a death-rate of 24·1 per thousand as against 21·8 per thousand, the rate for the previous year. The highest district mortality was in Shubra, with a death-rate of 50·8 per thousand of the population as compared with 41·6 in 1913.

The districts with rates above and those with rates below the general city rate are the same as last year.

In Table XLVI the death-rates for the various districts are shown in comparison with those of 1913.

TABLE XLVI.—DISTRICT ANNUAL DEATH-RATES PER THOUSAND OF POPULATION.

DISTRICT.						Annual Death-rate in 1914.	Annual Death-rate in 1913.
Ezbekia	...	...	...	...	...	24·1	21·8
Musky	...	...	...	...	...	25·3	23·7
Helwân	...	...	...	...	...	27·6	33·1
Abdin...	...	...	...	...	...	29·3	29·4
Darb el Ahmar	...	...	...	...	...	30·9	31·0
Gamalia	...	...	...	...	...	34·9	34·6
Bab el Sha'ria	...	...	...	...	...	35·5	33·8
Waily	...	...	...	...	...	36·4	41·7
Sayeda Zenab	...	...	...	...	...	36·5	53·8
Khalifa	...	...	...	...	...	39·8	37·6
Old Cairo	...	...	...	...	...	39·9	46·9
Bulâq	...	...	...	...	...	41·8	38·8
Shubra	...	...	...	...	...	50·8	41·6

The comparison between the two years is, however, in some districts, scarcely just, inasmuch as the 1914 rates have been corrected by the distribution, to their proper districts, of deaths in the various hospitals and public institutions, whereas the 1913 rates are not so corrected. The districts most affected in this way are Shubra and Waily.

Out of the total of 26,707 deaths, 25,892 were deaths of Egyptians and 815 of foreigners.

In Chart I the total weekly deaths are shown in comparison with those of the three previous years.

Of children under the age of one year, 8,875 died during 1914, giving an *infantile mortality rate* of 283 per thousand births for the whole city as compared with 292 in 1913.

During the quinquennial period ending with the present year, the mean annual infantile mortality rate was 299 per thousand births, the highest during that period being 323 in 1911 and the lowest that of the present year.

As regards the various districts in the city, the lowest infantile mortality occurred in Helwân with 197 infantile deaths per thousand births. The highest was Old Cairo with an infantile mortality rate of 343 per thousand births.



WEEKLY MORTALITY  
CAIRO.



Reproduced at the Survey Dept Cairo Nov 1915 (314-49)

1911 —————

1914 —————

1912 —————

1913 —————





In Table XLVII the district infantile mortality rates are shown in comparison with those of last year.

TABLE XLVII.—DISTRICT INFANTILE MORTALITY RATES PER THOUSAND BIRTHS.

DISTRICT.	Infantile Mortality in 1914.	Infantile Mortality in 1913.
Helwân ... ..	197	264
Ezbekîa ... ..	205	237
Mnsky ... ..	220	222
Darb el Ahmar ... ..	266	282
‘Abdîn ... ..	272	278
Gamalia ... ..	278	263
Sayeda Zenab ... ..	278	272
Waily ... ..	281	277
Bab el Sha‘rîa ... ..	284	278
Khalifa ... ..	286	276
Bulâq ... ..	306	327
Shubra ... ..	306	277
Old Cairo ... ..	343	396

Judged, therefore, both by the death and infantile mortality rates, the districts of Ezbekîa and Musky, as was the case last year, show the best results. Bulâq and Old Cairo, as in 1913, give the worst, and to this latter group in 1914 must be added the district of Shubra.

As showing the influence of overcrowding on health it is instructive, in this connection, to compare the death and infantile mortality rates in the various districts with reference to the density of population in each.

The number of persons per hundred rooms, as given in the last census return, may be taken as a measure of the density of population, and a comparison of the figures clearly indicates the intimate correlation between density of population and health as expressed by death and infantile mortality rates.

The tendency for higher densities of population to be accompanied by higher death and infantile mortality rates may be seen in Table XLVIII where the number of persons per hundred rooms is shown in connection with the death and infantile mortality rates in the various districts.

TABLE XLVIII.—DISTRICT ANNUAL DEATH AND INFANTILE MORTALITY RATES IN 1914 IN RELATION TO DENSITY OF POPULATION.

DISTRICT.	Number of Persons per Hundred Rooms.	Death-rate per Thousand of Population.	Infantile Mortality Rate per Thousand Births.
Helwân ... ..	121	27·6	197
Ezbekîa ... ..	151	24·1	205
‘Abdîn ... ..	176	29·3	272
Musky ... ..	177	25·3	220
Sayeda Zenab ... ..	178	36·5	278
Waily ... ..	187	36·4	281
Bab el Sha‘rîa ... ..	191	35·5	284
Darb el Ahmar ... ..	202	30·9	266
Shubra ... ..	203	50·8	306
Gamalia ... ..	213	34·9	278
Khâlifa ... ..	213	39·8	286
Bulâq ... ..	230	41·8	306
Old Cairo ... ..	248	39·9	343

Of the 8,875 deaths of children under one year of age in 1914, 8,768 occurred amongst Egyptians and 107 amongst foreigners.

The Egyptian infantile mortality rate was therefore 285 per thousand births as against 188 in the case of foreigners.

The infantile mortality curve (*see* Chart II), low in January, dropped still further in February and the first week of March, after which a definite rise began, reaching almost its summit at the beginning of June. The high level was maintained until the second week of August which was marked by a further sharp rise, after which the mortality rapidly declined, reaching its lowest point in the third week of December. It is interesting to note that the sharp rise which took place in the second week of August coincided with the commencement of the European war and occurred principally in those districts largely populated by the extremely poor. The General Mortality Chart (Chart I) shows a similar sharp rise, but this is the same rise being almost entirely due to the increase in the infantile mortality. In Chart II the infantile mortality curve for 1914 is shown in comparison with that of the three previous years. The principal causes of infantile death were diarrhoea, enteritis, and marasmus (*see* Chart III).

In Table XLIX the population and vital statistic figures for 1914 will be found arranged in tabular form.

TABLE XLIX.—POPULATION AND VITAL STATISTICS OF CAIRO  
AND ITS QUARTERS.

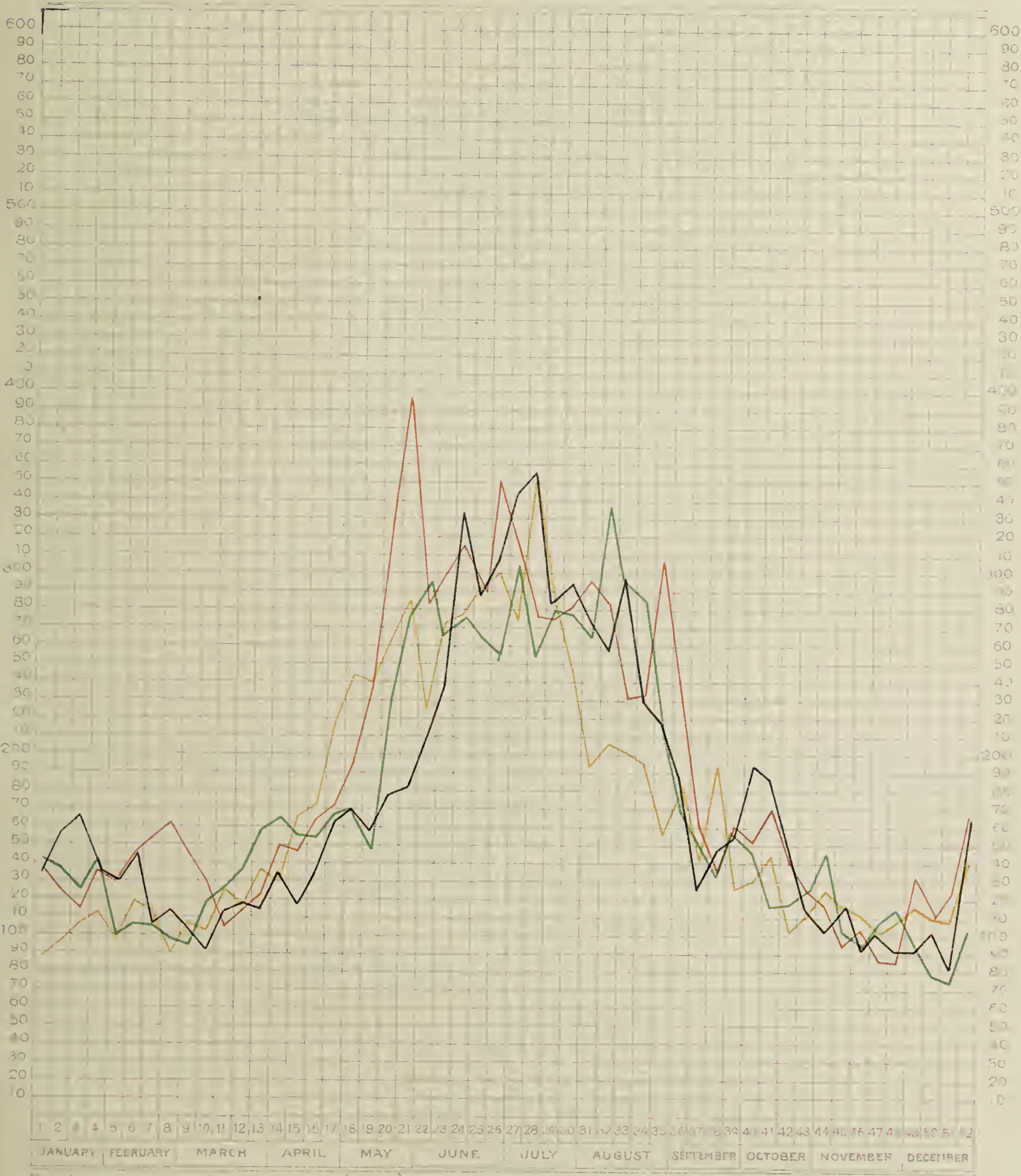
DISTRICT.	Population.	Number of Deaths.	Death-rate per Thousand of Population.	Number of Births.	Birth-rate per Thousand of Population.	Number of Infantile Deaths (0-1 Year).	Infantile Mortality Rate per Thousand Births.
Musky ... ..	24,427	619	25·3	727	29·7	160	220
Bab el Sha'ria ...	62,627	2,228	35·5	2,500	39·9	711	284
Ezbekia . . . .	51,615	1,246	24·1	1,690	32·7	347	205
'Abdin ... ..	59,160	1,736	29·3	1,959	33·1	534	272
Sayeda Zenab ...	72,070	2,635	36·5	3,203	44·4	891	278
Khalifa ... ..	59,748	2,378	39·8	2,744	45·9	785	286
Helwan ... ..	8,477	234	27·6	379	44·7	75	197
Darb el Almar ...	74,435	2,302	30·9	2,687	36·0	717	266
Gamalia ... ..	65,478	2,286	34·9	2,788	42·5	777	278
Shubra ... ..	54,186	2,755	50·8	3,288	60·6	1,009	306
Bulâq ... ..	99,361	4,154	41·8	4,999	50·3	1,533	306
Old Cairo ... ..	34,879	1,395	39·9	1,775	50·8	610	343
Waily ... ..	59,207	2,160	36·4	2,575	43·4	726	281
TOTALS ...	725,670	26,128*	36·0	31,314	43·1	8,875†	283

In last year's report, it was pointed out that, in the calculation of the district death and infantile mortality rates, the results were largely influenced in certain districts by the existence therein of large public institutions dealing with the sick, the deaths in these having been included in the figures of the districts in which they were situated. This arrangement, which was a relic of the past, unavoidable owing to lack of staff, obviously led to an over-estimation of the rates in a few districts where such institutions abounded, and a consequent, though comparatively slight, under-estimation of the rates of other districts. With the increase of personnel resulting from the institution last year of a special branch of the Inspectorate dealing with infectious disease, it has become possible to carry out the necessary corrections for this cause, and the figures for 1914 have been so corrected. It was not expected that such residential corrections would materially influence infantile mortality rates, as the number of infants receiving institutional treatment is very small, and this has been found to be the case; but a considerable reduction of the death-rates was to be anticipated in certain districts where the rates were obviously inflated from the causes mentioned. The districts primarily affected were Sayeda Zenab, Helwan, and Waily, and, as was to be expected, the corrections made have resulted in a notable reduction

\* Does not include 579 deaths, in public institutions in Cairo, of persons belonging to districts outside the City boundary.  
† Does not include 118 deaths, in public institutions, of infants coming from outside districts.



WEEKLY INFANTILE MORTALITY  
Children 0-1 year.  
CAIRO.



Reproduced at the Survey Dept Cairo Nov 1915 (314-49)

1911

1914

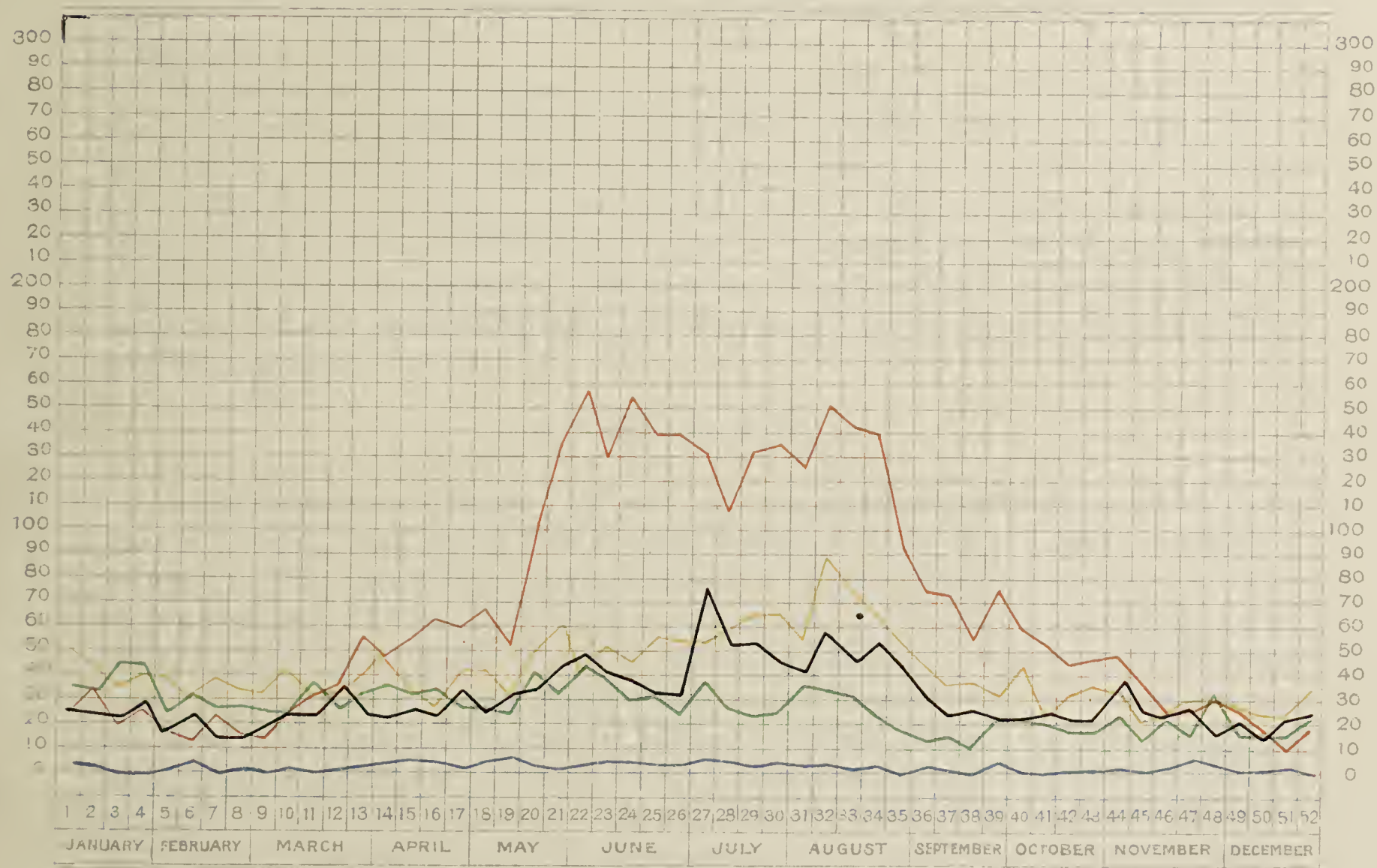
1912

1913





WEEKLY INFANTILE MORTALITY  
Children 0-1 year.  
CAIRO - 1914.



Reproduced at the Survey Dept Cairo Nov 1915 (314-49)

Diarrhoea and Enteritis \_\_\_\_\_ Pulmonary and Bronchial Diseases \_\_\_\_\_  
Marasmus \_\_\_\_\_ Other Diseases \_\_\_\_\_ Infectious Diseases \_\_\_\_\_





in the rates of these districts. In 1913, in Sayeda Zenab district, the death-rate calculated on a totality of the deaths occurring therein was 53·8 per thousand of the population. This estimate, however, included 1,252 deaths in Qasr el 'Aini hospital, very few of which properly appertained to this district. Exclusive of these deaths, the rate was 36·2, and the opinion was given from an appraisal of the conditions in the district that in all probability the true rate for this district would work out at much the same as the general rate for Cairo. In the present year this has been found to be the case, the rate for Sayeda Zenab residentially corrected being 36·5 as compared with 36·0 the general rate for the city.

The death rate of Waily in 1914, after correction for non-residential deaths, works out at 36·4, as against an uncorrected rate of 41·7 last year. A consideration of the conditions of this district, however, would lead one to expect a smaller death-rate, and there is every probability, as has been already suggested, that all the rates of this district are unduly inflated through an under-estimate of the population.

As regards Helwân, the importance of the residential correction depends largely on the winter influx of invalid foreigners, which in the present year has been considerably reduced owing to the war.

The general result of the correction for non-residential deaths has been to exclude from the Cairo total 579 deaths, in Cairo, of persons from localities without the city boundary. To make the residential correction just, the exclusion of the above from the estimate should be accompanied by the addition of the outside deaths of Cairo residents. Figures for the latter, however, are not available, but their non-inclusion is in all probability comparatively unimportant, since the number of outside deaths of Cairo residents is relatively small as compared with non-residential deaths in the city, to which many sick from outside districts flock for treatment.

#### (c) INFECTIOUS DISEASE.

In the present year, a further increase is to be noted in the number of cases of infectious disease declared, there having been recorded a total of 5,413 cases in 1914, as compared with 4,161 in 1913, and 2,895 in 1912. Of these cases, 5,008, with 1,626 deaths, are ascribable to the eight principal notifiable diseases, *viz.* smallpox, relapsing fever, cerebro-spinal fever, typhus, typhoid, scarlet fever, diphtheria, and measles. This gives for these diseases a rate per thousand of the population of 6·901 cases recorded and a zymotic death-rate, calculated on this group of diseases, of 2·240 per thousand living. To be excluded from these figures, however, are 130 cases, with 16 deaths, inscribed in the city registers but concerning hospital patients of extra-urban provenance. As regards Cairo itself, therefore, the number of cases and deaths of the eight principal diseases are properly speaking 4,878 and 1,610 respectively, giving a rate of 6·722 cases recorded and a death-rate of 2·218 per thousand of the population, and it is these corrected figures which are shown in the tables.

No residential corrections, however, were made in the figures for 1913 and 1912, and in a comparison of the rates of the present year with those of the two previous years, a more accurate estimate of the relative conditions would be obtained by the employment of the crude rates in the case of all three. In the detailed comparison of the individual infectious diseases, however, the difference between the rates as corrected by the exclusion of outside cases admitted to public institutions and the uncorrected rates is of such comparative insignificance that, in order to avoid a duplicity of figures, the crude numbers for 1914 will only be used in the primary contrast of the zymotic group totals for the various years, the corrected figures being elsewhere employed.

From the gross totals of recorded cases already given, it will be seen that a considerable increase has occurred in the number of cases of infectious disease recorded in 1914, the general total of 5,413 cases registered in the present year being 30 per cent greater than the 1913



figures, or 86 per cent more than those of 1912. As regards the share of these totals furnished by the eight principal notifiable diseases, a similar increase is to be noticed, the 5,008 cases registered in 1914 being 26 per cent greater than the 3,955 cases recorded in 1913, which in its turn showed an advance of 39 per cent over the 2,841 cases in 1912, making a total increase of 76 per cent in the notifications of the eight principal infectious diseases in 1914 as compared with 1912. In considering the reasons for this increase in the number of infectious cases recorded since 1912, the figures for the eight principal notifiable diseases only will be taken since these provide the bulk of the cases and have been analysed more in detail than is necessary in the case of the less important diseases. In Table L are shown the detailed figures of the individual diseases.

TABLE L.—INFECTIOUS DISEASE IN 1912, 1913, AND 1914.

*Estimated Population in 1912 = 704,956. Estimated population in 1913 = 715,609.*  
*Estimated population in 1914 = 725,670.*

DISEASE.	Year.	Number of Cases Recorded.	Number of Deaths.	Cases Recorded per Thousand of Population.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Smallpox ... ..	1912	68	16	0·096	0·022	23·5
	1913	276	50	0·385	0·069	18·1
	1914	983	181	1·354	0·249	18·4
Measles ... ..	1912	765	368	1·085	0·507	48·1
	1913	1,087	404	1·518	0·564	37·1
	1914	469	124	0·646	0·170	26·4
Scarlet fever ... ..	1912	107	23	0·151	0·032	21·5
	1913	167	27	0·233	0·037	16·1
	1914	98	9	0·135	0·012	9·1
Diphtheria ... ..	1912	1,109	528	1·573	0·748	47·6
	1913	1,308	562	1·827	0·785	42·9
	1914	1,412	685	1·945	0·943	48·5
Typhoid fever ... ..	1912	453	175	0·642	0·248	38·6
	1913	728	224	1·017	0·313	30·7
	1914	1,409	311	1·941	0·428	22·0
Typhus fever ... ..	1912	232	187	0·329	0·265	80·6
	1913	216	156	0·301	0·217	72·2
	1914	351	232	0·483	0·319	66·0
Relapsing fever ... ..	1912	37	3	0·052	0·004	8·1
	1913	21	5	0·029	0·006	23·8
	1914	10	1	0·013	0·001	10·0
Cerebro-spinal meningitis ...	1912	70	23	0·099	0·032	32·8
	1913	152	43	0·212	0·060	28·2
	1914	146	67	0·201	0·092	45·8
TOTALS ... ..	1912	2,841	1,323	4·030	1·877	46·5
	1913	3,955	1,471	5·526	2·055	37·1
	1914	4,878	1,610	6·722	2·218	33·0

In the report for 1913, attention was drawn to the increase in the number of infectious cases recorded then as compared with those of the previous year and it was indicated that this increase was to be explained almost entirely by an increase in the number of cases discovered rather than to any increase in the actual zymotic incidence, a result to be attributed to a stricter enforcement of the law regarding notification rendered possible by the provision in 1913 of the special staff for dealing with infectious disease asked for in the report for 1911. The same applies largely to the augmented figures for the present year, but as the



increased activity in dealing with infectious diseases, by bringing to light a large number of cases which formerly would have remained unknown, has shown a tendency at times to give rise to a certain amount of public alarm, it appears advisable that the reasons, on which is based the conclusion that the progressive increase, since 1912, in the number of cases recorded does not represent an actual increase in the incidence of infectious diseases, should be given more in detail than was done in last year's report.

Carelessness, a desire to evade the protective measures laid down by law, and the fact that in the large majority of cases no medical attendance is called for during life, has resulted, in the past, and still results in a considerable number of cases of infectious disease remaining unknown. The more active the search, however, naturally the fewer the cases of evasion, and the number of cases recorded will therefore largely depend on the efficiency of the methods adopted for their discovery. It would be obviously unfair therefore to compare the raw notifications figures for 1913 and 1914 during which arrangements for a more efficient control of infectious disease have been in force with years previous to such arrangements. In fact no reliable information as to relative zymotic incidence can be obtained by a comparison of such figures. We must therefore fall back on the only other numerical record appertaining to infectious disease, namely the number of deaths recorded from such disease, and from this a more trustworthy estimate of relative zymotic incidence is to be obtained, since whatever the possibility of evasion in the case of infectious disease during life, it must be much less in the case of deaths from such diseases, as all deaths must be registered and the cause thereof certified. In discussing, therefore, the extent to which the increase in the number of cases may be taken as indicating a possible increase in the zymotic incidence, the inferences will be based on estimates calculated from the mortality figures of the various years.

In 1913, the number of deaths from the eight principal notifiable diseases was 1,471, as against 1,323 in 1912. Now in 1912, the 1,323 deaths were derived from a total of 2,841 cases recorded, so that, given similar conditions in both years, the 1,471 deaths in 1913 should have corresponded to only 3,158 cases, instead of the 3,955 actually recorded, if the notification figures in each year had been an accurate index of incidence. Accepting for the moment, therefore, the increase in the number of deaths registered as evidence of the probability of a proportionate increase in incidence, there still remain the extra 797 cases, not thus accounted for, to give reasonable grounds for suspecting that the increase in the number of cases recorded is less due to any increase of incidence than to an increased proportion of discovered cases. As, however, these figures are based on totals of a group of diseases, the individual elements of which differ widely in their mortality, it is obviously possible to have a considerable actual increase in the number of cases in any one year as compared with another, without a corresponding increase in the death total if the aggregates of the year in question are largely derived from elements of the group possessing a low mortality rate. It is necessary, therefore, before accepting such a conclusion, that a detailed examination of the individual group elements should be made in order to exclude the possibility of error from this cause. Taking the deaths from each disease in 1913 separately and calculating the number of cases of each which should have been recorded upon a basis of the proportion of deaths to cases recorded in 1912, we arrive, however, at a very similar result to that obtained when the calculation is based on the aggregate figures of the group. Thus calculated, on the 1912 ratio, the deaths in 1913 should have corresponded to 212 cases of smallpox against the 276 actually recorded, 839 cases of measles against 1,087 recorded, 125 cases of scarlet fever against 167 recorded, 1,180 cases of diphtheria against 1,308 recorded, 579 cases of typhoid against 728 recorded, 193 cases of typhus against 216 recorded, 61 cases of relapsing fever against 21 cases recorded, and 130 cases of cerebro-spinal fever against the 152 cases recorded, or a total of 3,319 cases as compared with the 3,955 cases actually recorded.



Considered therefore both separately and as a group the number of infectious cases recorded in 1913 is considerably greater, relatively to the 1912 figures, than can be altogether accounted for by any increased incidence, basing the measure of such incidence on the ratio of deaths to cases recorded in 1912. The disproportionate increase in 1913 affects all elements of the group with the exception of relapsing fever which may be left out of consideration since, in both years, the number of its cases and deaths has been so small as to expose any estimates, based thereon, to accidental variations considerably affecting their reliability. Unless, therefore, we are prepared to accept the unlikely theory of lessened virulence in the case of all the diseases as a sufficient explanation of the disproportionate increase of cases recorded over deaths in 1913, the disproportion can only be considered largely as an indication of increase in the recorded proportion of the total cases.

As regards 1914, a similar disproportion is to be found between the increase in the number of cases recorded and that in the number of deaths when considered in relation with the figures of the previous two years. Based on the 1913 ratio of deaths to recorded cases, the deaths in 1914 should have corresponded to only 4,328 cases instead of to the 4,878 actually recorded, whilst calculated on the 1912 ratio the number of cases would have been only 3,457. Taking the deaths from each disease separately and calculating from them the probable number of cases of each in 1914, estimated on the ratios of deaths to cases recorded in 1912 and in 1913, the probable number of cases should have been: for smallpox 769 estimated on the 1912 ratio and 999 on that of 1913, as against 983 cases recorded; for measles 257 cases on the 1912 ratio and 333 on the ratio of 1913, as against 469 actually recorded; for scarlet fever 42 cases on the 1912 ratio and 55 on the 1913, as against 98 cases recorded; for diphtheria 1,438 cases on the 1912 ratio and 1,594 on that of 1913, as against 1,412 cases recorded; for typhoid fever 805 cases estimated on the 1912 basis and 1,010 on that of 1913, as against 1,409 cases actually recorded; for typhus fever 287 cases on the 1912 ratio and 321 on the 1913, as against 351 cases actually recorded; for relapsing fever 12 cases estimated on the 1912 ratio and 4 cases on that of 1913, as against 10 cases actually recorded; and for cerebro-spinal meningitis 204 cases estimated on the 1912 basis and 236 cases on that of 1913, as against 146 cases actually recorded in 1914; or zymotic totals of 3,814 on the individual 1912 estimates and 4,552 on the 1913, compared with the total of 4,878 actually occurring. Calculated therefore both separately and as a whole, the total cases of the group recorded in 1914 show a disproportionate increase as compared with the deaths, and thus bear out generally the conclusions arrived at from a study of the 1913 figures. Excluding relapsing fever, however, the totals of which are too small to be statistically safe, a study of the figures of the separate diseases of the group in each year indicates that the position in 1914 whilst, broadly speaking, agreeing with that of the preceding year differs somewhat in its details. Thus, whilst, as has been shown, the disproportionate increase affected all the elements of the group in 1913, in 1914 the number of cases recorded fell considerably short of estimates based on the ratios of either of the preceding two years in the case of diphtheria and cerebro-spinal fever and slightly short of the estimate based on the 1913 ratio, in the case of smallpox. The question therefore arises as regards these diseases whether the shortage is attributable to any particular cause. The discrepancy between the number of cases expected and those recorded in the case of smallpox is so trivial that it may be taken that the number of cases of this disease recorded corresponds with the expectations based on the number of deaths. This is in accordance with what might be expected, since smallpox is not an easily concealed disease and active measures for discovery are likely to attain their full results more immediately than is to be expected in the case of more easily hidden diseases. As will be shown later in discussing the smallpox epidemic of the present year the known case-mortality amongst the 587 cases which were treated in hospital is not greatly inferior to the ratio of the total deaths to cases recorded showing that the number of cases which



remained undiscovered represented in all probability only a comparatively inconsiderable proportion of the actual number of cases which occurred. The inference is therefore that the measures of control instituted in 1913 attained at once their full measure of success in the case of this disease, resulting in a concurrence between the number of cases actually recorded in 1914 and the expectations based on the 1913 figures.

As regards the shortage in the number of cases of cerebro-spinal fever recorded, it is impossible to assign any particular reason. There was nothing in the course of the year to lead to any suspicion of a more extensive concealment of disease than is usual, and the discrepancy may possibly be attributable to a greater virulence in the type of the disease. The number of cases, however, is small, and the liability of the resulting estimates to accidental variations may sufficiently account for any difference.

With regard to the discrepancy between the number of cases of diphtheria recorded and the expectations based on the figures of the previous years, a different state of affairs is to be found. Of the 685 cases dying from diphtheria during the year, 363 were only discovered after death had occurred. The cause of the shortage in the number of cases recorded will therefore probably be found in a lessened discovery of cases, attributable in part to the initial public anxiety resulting from the commencement of the European war. The seasonal prevalence of diphtheria, as will be seen from the chart, occurs in the latter part of the year or just in that period immediately following the commencement of hostilities when the diversion of the public interest to outside matters led to the loss of the important source of information which results from a popular tendency in normal times for people to take an intelligent and critical interest in the affairs of their neighbours.

A review of the whole of the foregoing arguments leads to the conclusion, therefore, that the increase in the number of cases of infectious disease recorded in 1913 and 1914 is generally speaking to be taken as, principally, an indication of increased discovery and not of increased incidence, a fact borne out by the general reduction to be noticed in the ratios of deaths to cases recorded.

The comparison based on the mortality figures, however, would appear to indicate that some increase has occurred in the incidence of the various diseases, and the question arises as to whether this is to be taken as altogether an actual increase or is wholly or in part attributable to the existence of possible sources of error in the use of a mortality test of zymotic incidence.

It might be thought that the number of deaths recorded from an infectious disease could not possibly be influenced by the number of cases notified during life, but such influence does occur, and the explanation of this is to be found in the circumstances surrounding the registration of deaths in this country.

In the case of the great majority of deaths from all causes recorded in any year, no medical attendance has been given during life and a post-mortem diagnosis of the cause of death has to be made in each case by the District Medical Officers from the inspection of the body, and the history of the illness as related by the relatives of the deceased. The primary objects of these inspections are the detection of crime and infectious disease, and as regards the latter, in many cases, the diagnosis is assisted by the finding of living cases in the house. Such assistance, however, is likely to be absent in the case of infectious diseases characterized by a moderate infectivity, and when, in addition, the illness is one which gives rise to no definite external post-mortem appearances, the only bases for a diagnosis may lie in a sketchy and possibly inaccurate history of the illness as narrated by the relatives of the deceased. Error is therefore liable to creep in, and many of such cases are in consequence missed. Every death, therefore, from an infectious disease recognized during life, is a death from which this possibility of error is excluded, and the greater the number of such recognitions during life the greater is likely to be the number of deaths



recorded from this cause. The efficiency of the methods adopted for the discovery of infectious disease is therefore likely to influence zymotic death-rates in the direction of increase, and this factor must be borne in mind in all deductions regarding comparative incidence of infectious diseases based on such rates but more specially in those cases where diseases of low infectivity, presenting no obvious characteristic external post-mortem appearances, are concerned. Thus the probability of error, which is small in the case of smallpox, for example, becomes an important factor in the results in the case of a disease such as typhoid fever. It must be taken therefore that the increase in the number of infectious deaths registered is likely, in many cases, to be largely due to the increase in the number of cases recognized during life. To what extent, however, allowance should be made for this, it is impossible to say, but with the exceptions of smallpox and diphtheria, one is inclined to believe that the increase in the number of deaths recorded from the various diseases is principally due to the earlier recognition of a larger number of cases, a conclusion borne out by the fact that the reduction in the ratio of deaths to cases recorded is most marked in just those diseases in which the actual cause of death might be most readily missed in a post-mortem diagnosis.

In relation to this question of the false impression of increase likely to result from the better discovery of cases, it should be pointed out, in addition, that a further exaggerated idea of the prevalence of infectious disease is apt to be given by the increased advertisement of its existence which must result from any extension of measures of control. Thus, under the scheme at present working, the occurrence of a case of infectious disease is likely to become known, not only, as formerly, to residents in the vicinity and other persons immediately concerned, through the application of the local preventive measures necessary, but also to a considerable number of other persons from the fact of its incidence being widely distributed, in various directions, in warning employers of persons who are or who have been in contact with the patient when this is necessary, in tracing and dealing with persons who have visited the patient before the nature of his illness was recognized, and generally speaking in taking such other measures as are necessary to prevent the indirect transmission of the infection, in addition to the merely local measures of isolation and disinfection previously carried out.

In the report for last year attention was drawn to the fact that the notification of infectious disease was still extremely unsatisfactory, though the more stringent application of punitive measures was beginning to make itself felt. In the present year there has been a considerable improvement as regards this, and this improvement has been an important factor in the increase in the number of cases recorded. A study of the ratio of deaths to cases recorded, however, shows that there is still great room for improvement, particularly in the case of measles, diphtheria, and typhus fever.

In Table LI is shown the district distribution of the cases and deaths of the eight principal notifiable diseases during the year, and in Table LII are given for the purpose of comparison the general zymotic rates for the various districts. From the latter it will be seen that the highest number of cases recorded per thousand of the population was in 'Abdîn with a rate of 9.026. The lowest was in Old Cairo with only 2.924. The zymotic death-rate was highest in Bulâq with 2.606 deaths per thousand of the population. The lowest was in Helwân with 1.061 zymotic deaths per thousand living. Judged by the ratio of deaths to cases recorded, the best results, as regards notification, would appear to have been in Helwân with a rate of only 13.0 per cent of deaths, and the worst in Old Cairo with a rate of 53.9 deaths per hundred cases recorded.

In Figure 1 the recorded case and death-rates of the zymotic group in the various districts are shown in diagrammatic form per thousand of the population, the case-rates being represented by the combined blackened and hatched portions of the columns and the death-rates by the blackened portions only. In the subsequent discussion of individual



Figure 1

*Typhoid disease and death rates in  
Cairo Districts in 1914 per 1000 of population*

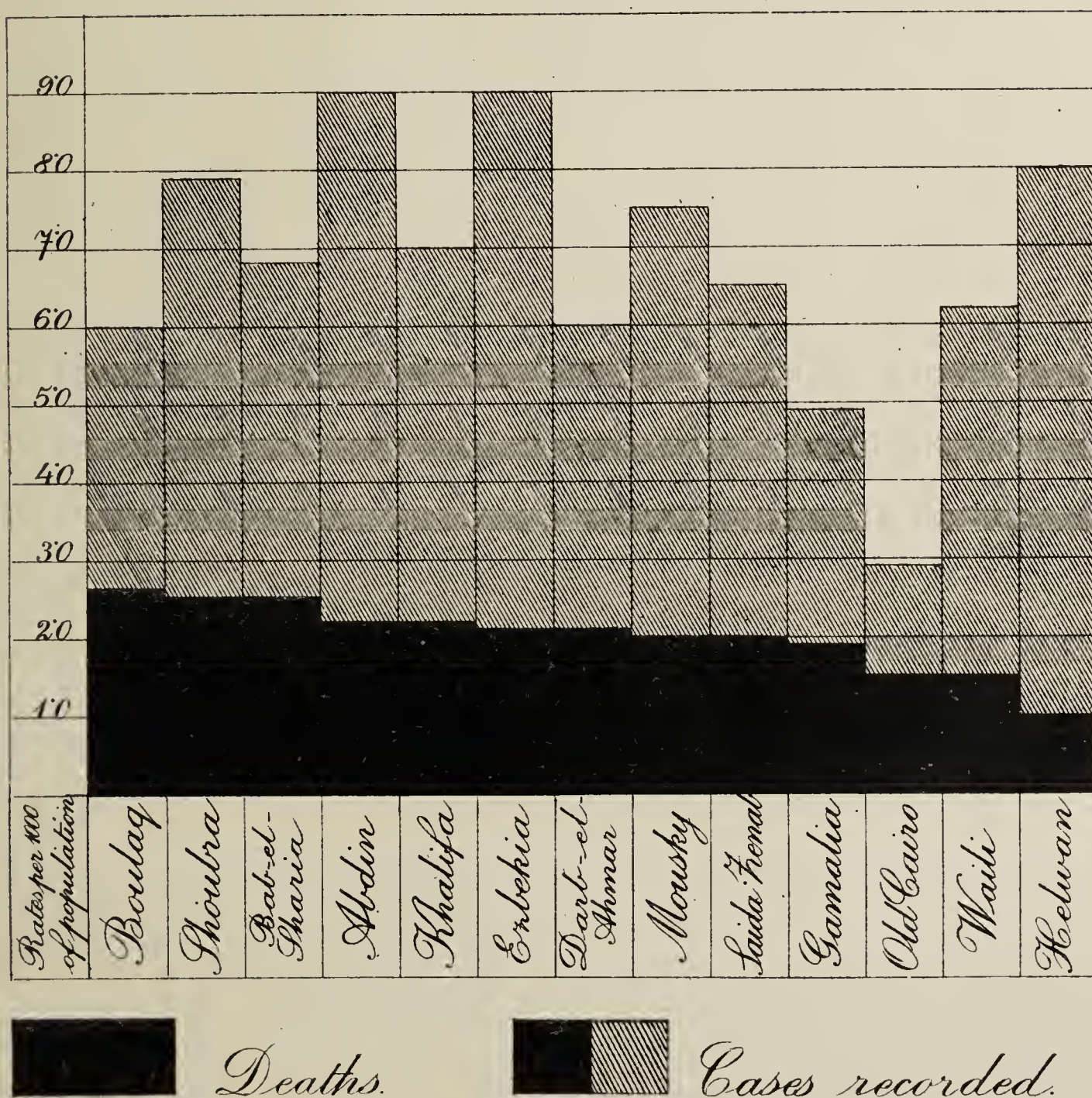






TABLE LI.—DISTRICT DISTRIBUTION OF ZYMOTIC DISEASE.

DISTRICT.	SMALLPOX.		RELAPSING FEVER.		CEREBRO-SPINAL FEVER.		TYPHUS FEVER.		TYPHOID FEVER.		SCARLET FEVER.		DIPHTHERIA.		MEASLES.		TOTALS.	
	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.	Cases.	Deaths.
Musky...	29	4	—	—	10	5	6	4	53	10	6	1	61	27	22	1	187	52
Bab el Sha'ria ...	105	23	—	—	16	8	18	8	131	34	5	—	138	83	18	4	431	160
Ezbekia ...	88	16	—	—	17	8	8	4	192	38	21	1	101	45	38	5	465	117
'Abdin... ..	118	24	—	—	14	7	13	5	163	45	11	1	145	58	70	1	534	141
Sayeda Zenab ...	100	15	1	—	7	2	22	13	96	24	8	—	175	82	72	17	481	153
Khalifa ...	57	8	2	—	10	6	60	27	149	15	8	2	106	58	32	26	424	142
Helwân ...	18	3	3	—	2	2	1	—	25	2	—	—	18	2	2	—	69	9
Darb el Ahmar ...	95	19	1	—	14	4	26	16	116	37	7	—	170	92	19	—	448	168
Gamalia ...	53	9	1	1	15	7	66	56	102	12	4	—	69	38	11	2	321	125
Shubra ...	98	24	—	—	12	5	5	2	109	16	11	1	125	56	73	36	433	140
Bulâq ...	129	17	1	—	5	3	105	91	155	63	8	1	139	60	66	24	608	259
Old Cairo ..	23	9	—	—	4	2	7	1	16	2	1	1	40	32	11	8	102	55
Waily ...	70	10	1	—	20	8	14	5	102	13	8	1	125	52	35	—	375	89
TOTALS FOR CAIRO ...	983	181	10	1	146	67	351	232	1,409	311	98	9	1,412	685	469	124	4,878	1,610
Extra-urban admissions to Cairo Hospitals ...	22	2	2	—	8	3	10	2	58	4	2	1	13	4	15	—	130	16
TOTALS ...	1,005	183	12	1	154	70	361	234	1,467	315	100	10	1,425	689	484	124	5,008	1,626



infectious diseases, similar diagrams are given when the figures are sufficiently large to permit of their advantageous employment, but the diagrams of these are based on rates

TABLE LII.—ZYMOTIC CASES AND DEATH-RATES IN CAIRO DISTRICTS.

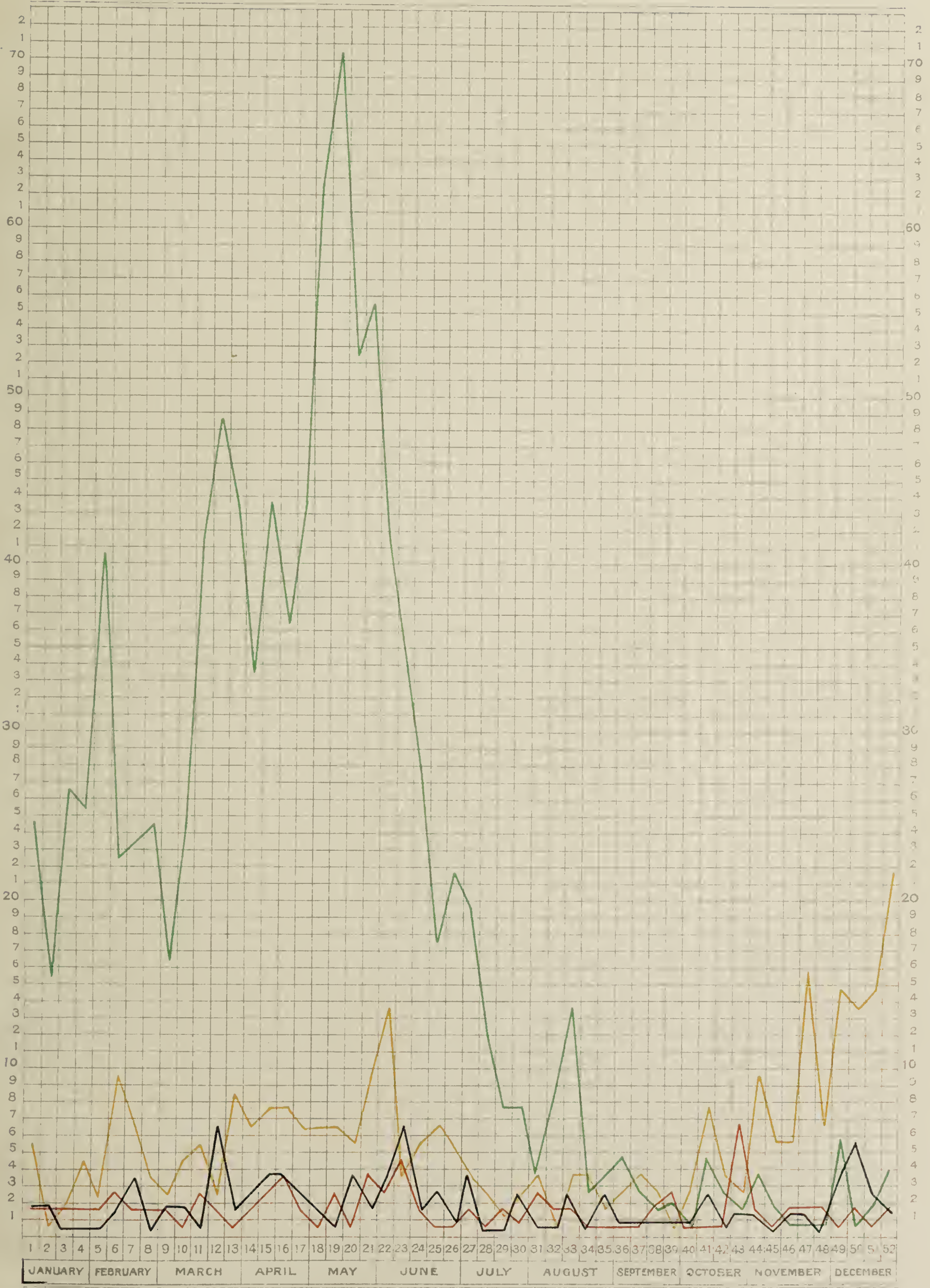
DISTRICT.	Number of Cases Recorded.	Cases Recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	187	7·654	52	2·128	27·8
Bab el Sha'ria ... ..	431	6·882	160	2·554	37·1
Ezbekia ... ..	465	9·009	117	2·266	25·1
'Abdîn ... ..	534	9·026	141	2·383	26·4
Sayeda Zenab ... ..	481	6·674	153	2·122	31·8
Khalifa ... ..	424	7·096	142	2·376	33·4
Helwân ... ..	69	8·139	9	1·061	13·0
Darb el Ahmar ... ..	448	6·018	168	2·257	37·5
Gamaliâ ... ..	321	4·902	125	1·909	38·9
Shubra ... ..	433	7·990	140	2·583	32·3
Bulâq ... ..	608	6·119	259	2·606	42·5
Old Cairo ... ..	102	2·924	55	1·576	53·9
Waily ... ..	375	6·333	89	1·503	23·7
TOTALS ... ..	4,878	6·722	1,610	2·218	33·0

per 10,000 of the population instead of the rates per 1,000 of the population used in the diagrams for the whole zymotic group.

*Smallpox* (Chart IV).—The year 1914 was marked by an epidemic of smallpox, and in order to arrive at a fair estimate of the extent of this epidemic it will be necessary to consider closely how far the cases actually notified as such represent this. During 1914 in Cairo the actual number of cases definitely registered as smallpox was 737, of which 715 actually belonged to Cairo and 22 were cases transported to the Cairo Fever Hospital from without the city boundaries. Circumstances, however, occurred during the epidemic which led to the suspicion that certain other cases should be added to these figures for a proper realization of the true extent of the epidemic, and it will be noticed that in the charts and tables the smallpox figures actually given are considerably higher than those noted above. It will be necessary, therefore, to discuss the grounds upon which was based the decision to include these extra cases before entering on the consideration of the epidemic. In discussing this question, whilst refusing to accept the accuracy of the notifications, it is reasonable to assume the correctness of the mortality figures, since experience has shown the comparative rarity of designedly false declarations of death in a disease generally so easily recognized as fatal smallpox. It will be taken therefore that the mortality figures are correct. During the year, including two fatal hospital cases coming from localities outside the city limits, 183 deaths from smallpox were registered in Cairo. Calculated on the 737 cases definitely registered as smallpox, this would give a ratio of deaths to cases recorded of 24·8 per cent. Of the 737 cases notified, 587 were treated in the Government Fever Hospital and 150 were isolated at their homes. Of the hospital cases 96 died, giving a hospital case-mortality of 16·3 per cent, leaving 87 deaths attributable to the outside cases. These latter, calculated on the 150 recorded cases treated outside hospital, give a ratio of deaths to notifications of 58·0 per cent for the outside cases. Now, given correct notification, the ratio of deaths to cases recorded should be identical with the case-mortality, and the hospital case-mortality should not differ widely from that amongst patients isolated outside, provided that the cases admitted into hospital are representative cases. In the epidemic under consideration, the hospital cases consisted almost entirely of persons whose treatment at home would have constituted a serious danger to the general public health and whose removal to hospital therefore was



SMALL POX.  
Weekly totals of Cases.



Reproduced at the Survey Dept. Cairo Nov. 1915 (314-49)

1911 —

1914 —

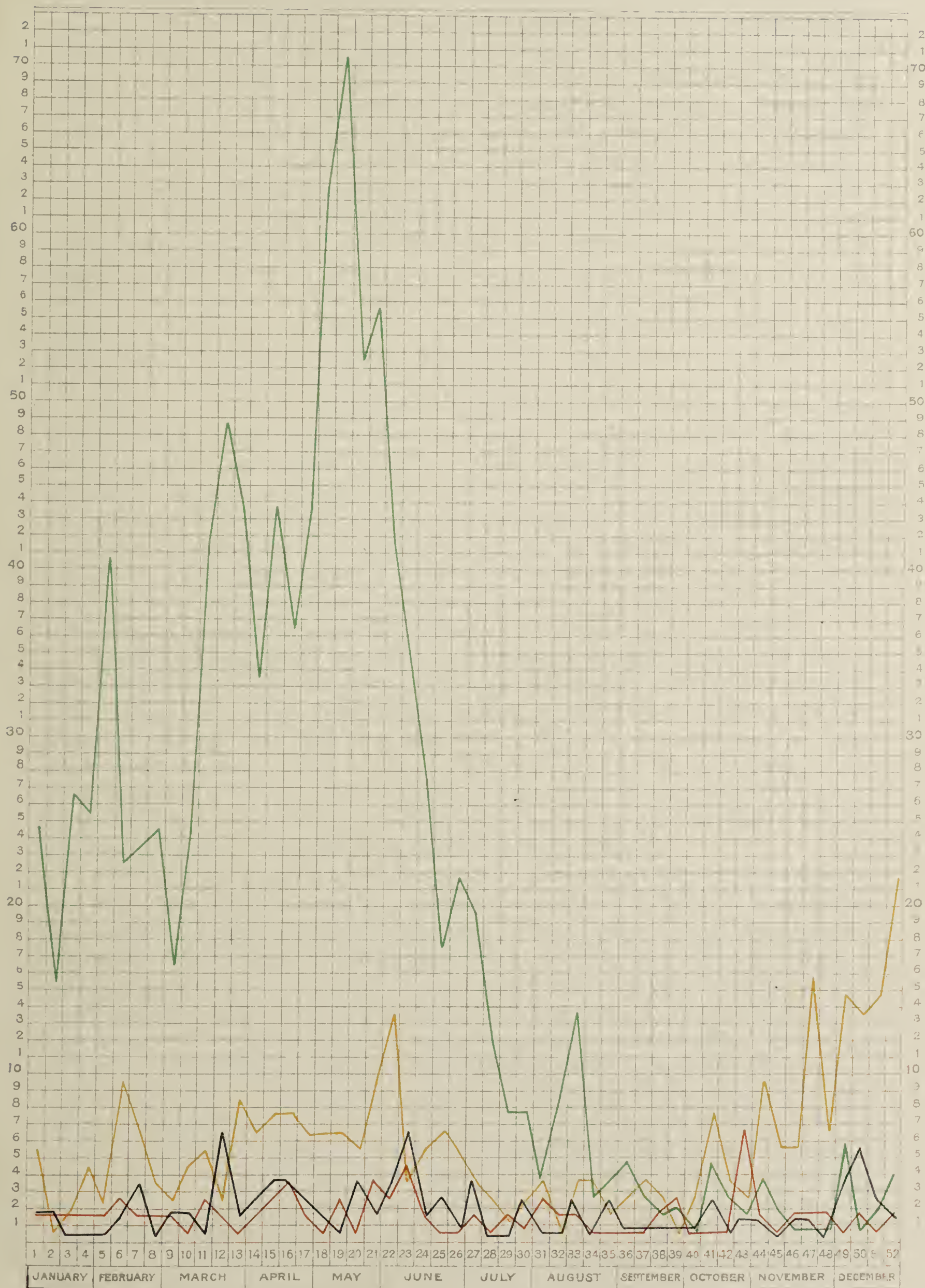
1912 —

1913 —





# SMALL POX. Weekly totals of Cases.



Reproduced at the Survey Dept Cairo Nov. 1915 (314-49)

1911 —

1914 —

1912 —

1913 —





insisted upon under the powers conferred by the infectious disease law. In deciding on the cases to be removed, almost the only consideration was the question of the public safety, and the cases admitted were consequently representative of the known cases in the epidemic being derived from all classes of the community and showing all types of the disease. It is reasonable to suppose, therefore, that the hospital case-mortality should approximate closely to the case-mortality of the epidemic and should not differ widely therefore from the ratio of deaths to cases recorded, if the notification figures are correct. In actual fact, however, as has been seen, the figures do differ widely, the general death-notification ratio of 24·8 per cent being 50 per cent above the hospital case-mortality, whilst the ratio of deaths to notifications amongst the outside cases is more than three times the case-mortality of the hospital. Such discrepancy is too great to be accounted for by a lessened mortality due to the better care and treatment received in hospital and must be taken as an indication that the notification figures represent a proportion only of the actual number of cases. An estimation on the basis of the hospital case-mortality would point to a very considerable proportion of unrecorded cases, and the question arises whether any cause can possibly be found to account for what is a very serious discrepancy.

Now, in previous years, experience has shown the notification results in smallpox to be better than in any other of the notifiable diseases, a result largely due to the difficulties of its concealment, the constant possibility of a fatal termination, and its easy recognition after death. Thus, the risk of discovery, combined with unwillingness to accept the burden of responsibility for the consequences of an uncontrolled focus of infection, acted as a strong deterrent to persons tempted to evade the law. In the epidemic under consideration, however, this satisfactory condition of affairs had obviously ceased to obtain, and the cause of this, it is believed, lies in the introduction, in the previous year, of a measure which was, in its inception, primarily intended for the improvement of notification.

It had been found in the past that in the occasional unnotified cases which came to light, the plea of a mistaken diagnosis of chicken-pox was frequently advanced as a defence. Some of these were genuine mistakes and some were not, but as chicken-pox was not then a notifiable disease, it was difficult to take action. With the object of tightening up the notification of smallpox, therefore, chicken-pox was added to the list of notifiable diseases in the latter half of last year, and it is in this measure, as will be shown, rather than in any real concealment of cases, that the explanation will be found for the discrepancy between the probable number of smallpox cases and those actually recorded.

Previous to the inclusion of chicken-pox, any person responsible for the notification of a mild or doubtful case of smallpox had either to declare it as such or take the serious responsibility of making no declaration whatever. With this limited choice, the intentional concealment of such cases was comparatively rare. Now, however, with the addition of chicken-pox to the schedule, a third choice has been provided which, in mild or doubtful cases, furnishes a middle course between the odium of declaring the graver disease and the responsibility of altogether ignoring the possible danger to public health. Though the provision of an alternative diagnosis was manifestly not the intention of the measure, which aimed rather at insuring some knowledge of possible sources of infection in erroneously diagnosed cases, the effect has been a free use of the term chicken-pox in the present epidemic to designate mild or doubtful forms of the more mischievous malady. The reason for the choice is obvious. Smallpox is included in Part I of the schedule attached to the infectious diseases law, and in consequence is liable to be dealt with by compulsory isolation in hospital when this is necessary in the interests of public health. Chicken-pox, on the other hand, belongs to Part II, in the case of which no such powers exist. By the use of the latter term, therefore, the application of the more stringent measures required for smallpox may be avoided without the serious responsibility of entirely ignoring the claims of public health. It first began to be suspected during the



course of the present epidemic that the newly-included disease was being largely taken advantage of as a cloak for the other, when it was noticed that notifications seemed to disclose the co-existence of an epidemic of chicken-pox corresponding suspiciously in its distribution, incidence, and times of appearance in the various districts, exactly with the known cases of smallpox. Investigations, though somewhat circumscribed by legal limitations, not only gave no indication of any undue prevalence of chicken-pox, but on the contrary clearly indicated the certainty that, in a large number of cases, a wrong diagnosis was being given. In spite of this evidence, however, it was obviously impossible to insist on an independent examination in all cases, but whenever circumstances gave reasonable grounds for taking the responsibility of demanding a probation of the diagnosis in the interests of public safety, our suspicions were supported by the discovery of smallpox in nearly every case. Many cases of smallpox, moreover, were so suspiciously related to previous cases of so-called chicken-pox as to constitute almost a certainty that the latter had in reality been wrongly reported.

All the weight of evidence therefore pointed to the fact that a very large majority at least, if not almost all, of the cases of chicken-pox reported during the present epidemic, should have been recorded as smallpox, and there was every indication that whatever the number of cases of chicken-pox which actually occurred it was too small to affect materially the accuracy of an estimate of the extent of the smallpox epidemic based on the inclusion of the chicken-pox cases. In watching the course of the smallpox epidemic, therefore, the combined figures were taken as an indication of its extent, and it is these combined figures which are used in this report as the measure of smallpox incidence during the year. Now, exclusive of the cases in which the diagnosis was actually challenged and corrected, there were 268 cases of chicken-pox notified during the course of the epidemic. Adding these to the 715 cases belonging to Cairo actually registered as smallpox, we obtain a total of 983 cases as representing the probable extent of the epidemic. Calculated on this figure the 181 deaths give a ratio of deaths to cases recorded of 18·4 per cent in 1914 as compared with 18·1 per cent the rate in the previous year, and 16·3 per cent the case-mortality of the hospital-treated cases in the present epidemic. The morbidity rate was 1·384 per thousand of the population as compared with 0·385 in the previous year, and the death-rate was 0·249 per thousand of population as against 0·069 in 1913. The cases were distributed in the various districts as follows: Bulâq 129, with 17 deaths; 'Abdîn 118, with 24 deaths; Bab el Sha'rîa 105, with 23 deaths; Sayeda Zenab 100, with 15 deaths; Shubra 98, with 24 deaths; Darb el Ahmar 95, with 19 deaths; Ezbekia 88, with 16 deaths; Waily 70, with 10 deaths; Khalîfa 57, with 8 deaths; Gamalîa 53, with 9 deaths; Musky 29, with 4 deaths; Old Cairo 23, with 9 deaths; and Helwân 18, with 3 deaths. There were in addition 22 cases admitted to the Government Fever Hospital from districts outside Cairo. Amongst these last there were two deaths.

The highest morbidity rate was in Helwân with 2·12 cases per thousand of the population, the lowest was in Gamalîa with 0·65 per thousand.

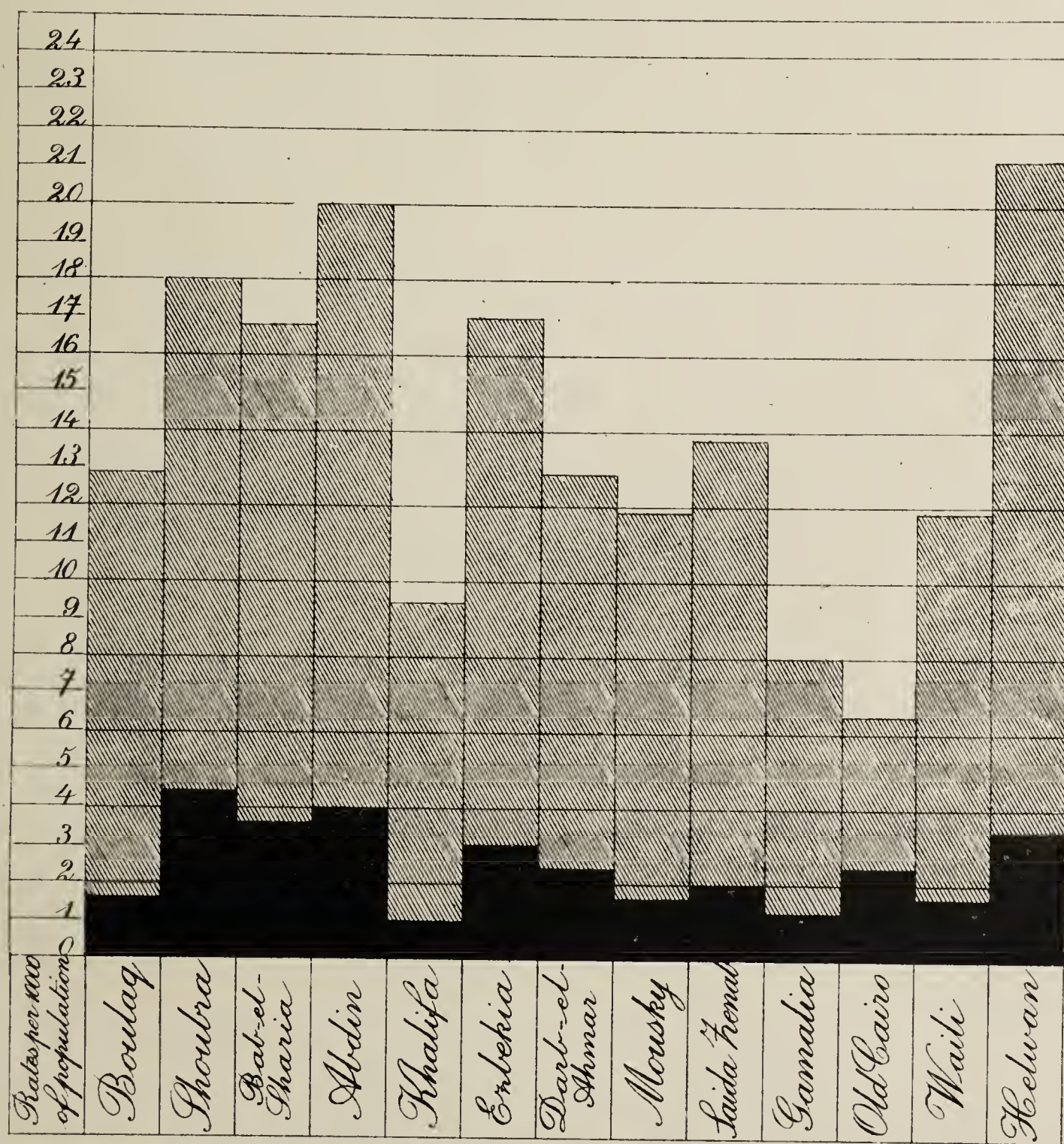
The epidemic which had shown signs of commencement towards the end of 1913 reached its height in the second week in May, after which it rapidly declined until, in the middle of August, the incidence of the disease had reached its normal. The seasonal prevalence of the disease, as indicated by the weekly occurrence of cases, is shown in Chart IV in comparison with that of the previous three years.

In Table LIII are given the morbidity and death-rates in the individual districts with the case-mortality in each, and in Figure 2 these rates are exhibited in a diagrammatic form.

*Relapsing Fever* (Chart V).—During 1914 the number of cases of relapsing fever has been very small, only ten cases having been recorded during the year, giving a rate of 0·013 case per thousand of the population, as compared with 0·029 in 1913 and 0·052 in 1912.



*Figure 2*  
*Small Pox case and death rates in*  
*Cairo Districts in 1914 per 10,000 of population*



*Deaths.*



*Cases recorded.*





Only one death was registered, the death-rate from this cause being therefore 0·001 per thousand living, as against rates of 0·006 in 1913 and 0·004 in 1912. The ratio of deaths

TABLE LIIL.—SMALLPOX CASE AND DEATH-RATES IN CAIRO DISTRICTS.

DISTRICT.	Number of Cases Recorded.	Cases recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	29	1·187	4	0·163	13·7
Bab el Sha'ria ... ..	105	1·676	23	0·367	21·9
Ezbekia ... ..	88	1·704	16	0·309	18·1
'Abdin ... ..	118	1·994	24	0·405	20·3
Sayeda Zenab ... ..	100	1·387	15	0·208	15·0
Khalifa ... ..	57	0·954	8	0·133	14·0
Helwan ... ..	18	2·123	3	0·353	16·6
Darb el Ahmar ... ..	95	1·276	19	0·255	20·0
Gamalia ... ..	53	0·809	9	0·137	16·9
Shubra ... ..	98	1·808	24	0·442	24·4
Bulâq ... ..	129	1·298	17	0·171	13·1
Old Cairo ... ..	23	0·659	9	0·258	39·1
Waily ... ..	70	1·182	10	0·168	14·2
TOTALS ... ..	983	1·354	181	0·249	18·4

to cases recorded was 10 per cent, against 23·8 per cent in 1913 and 8·1 per cent in 1912. The seasonal prevalence of the disease compared with that of the previous three years is shown in Chart V, whilst in Table LIV are given the morbidity and death-rates in each district of the City with the case mortality in each.

TABLE LIV.—RELAPSING FEVER CASE AND DEATH-RATES IN CAIRO DISTRICTS.

DISTRICT.	Number of Cases Recorded.	Cases Recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	—	—	—	—	—
Bab el Sha'ria ... ..	—	—	—	—	—
Ezbekia ... ..	—	—	—	—	—
'Abdin ... ..	—	—	—	—	—
Sayeda Zenab ... ..	1	0·013	—	—	—
Khalifa ... ..	2	0·033	—	—	—
Helwan ... ..	3	0·353	—	—	—
Darb el Ahmar ... ..	1	0·013	—	—	—
Gamalia ... ..	1	0·015	1	0·015	100·0
Shubra ... ..	—	—	—	—	—
Bulâq ... ..	1	0·010	—	—	—
Old Cairo ... ..	—	—	—	—	—
Waily ... ..	1	0·016	—	—	—
TOTALS ... ..	10	0·013	1	0·001	10·0

*Cerebro-spinal Meningitis* (Chart VI).—The incidence of this disease in 1914 was much the same as that in the previous year, there having been 146 cases registered as compared with 152 in 1913. The number of cases recorded per thousand of population was therefore 0·201, as compared with 0·212 in 1913 and 0·099 in 1912. The disease was most prevalent during the first half of the year, the highest point being reached at the end of March. In Chart VI the seasonal incidence of the disease is shown in comparison with that of the three previous years.

There were 67 deaths during the year, giving a death-rate of 0·092 per thousand of the population, as against rates of 0·060 and 0·032 in the two previous years. The ratio of deaths to recorded cases was 45·8 per cent, as compared with 28·2 per cent in 1913 and 32·8 per cent in 1912. In Table LV are shown the morbidity and death-rates in the individual districts



with the case-mortality in each. The highest incidence was recorded in the Musky district with 0·409 per thousand of population; the lowest was in Bulâq with 0·050. The highest death-rate occurred in Helwân with 0·235 per thousand living and the lowest in Sayeda Zenab with a rate of 0·027. In Figure 3, the district incidence and death-rates are given in a diagrammatic form.

TABLE LV.—CEREBRO-SPINAL MENINGITIS CASE AND DEATH-RATES IN CAIRO DISTRICTS.

DISTRICT.	Number of Cases Recorded.	Cases Recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	10	0·409	5	0·204	50·0
Bab el Sha'ria ... ..	16	0·255	8	0·127	50·0
Ezbekia ... ..	17	0·329	8	0·154	47·0
'Abdîn ... ..	14	0·236	7	0·118	50·0
Sayeda Zenab ... ..	7	0·097	2	0·027	28·5
Khalifa ... ..	10	0·167	6	0·100	60·0
Helwân ... ..	2	0·235	2	0·235	100·0
Darb el Ahmar ... ..	14	0·188	4	0·053	28·5
Gamalia ... ..	15	0·229	7	0·106	46·6
Shubra ... ..	12	0·221	5	0·092	41·6
Bulâq ... ..	5	0·050	3	0·030	60·0
Old Cairo ... ..	4	0·114	2	0·057	50·0
Waily ... ..	20	0·337	8	0·135	40·0
TOTALS ... ..	146	0·201	67	0·092	45·8

*Typhus Fever* (Chart VII).—The incidence of typhus fever during 1914 was somewhat higher than during the previous years, though the actual number of cases was not large. There were 351 cases recorded in 1914, giving a rate of 0·483 case per thousand of population, as compared with 0·301 and 0·329 in 1913 and 1912 respectively. The highest incidence was in the middle of March when 27 cases were recorded in one week. In Chart VII the seasonal prevalence of the disease as indicated by the weekly totals is shown in comparison with the three previous years.

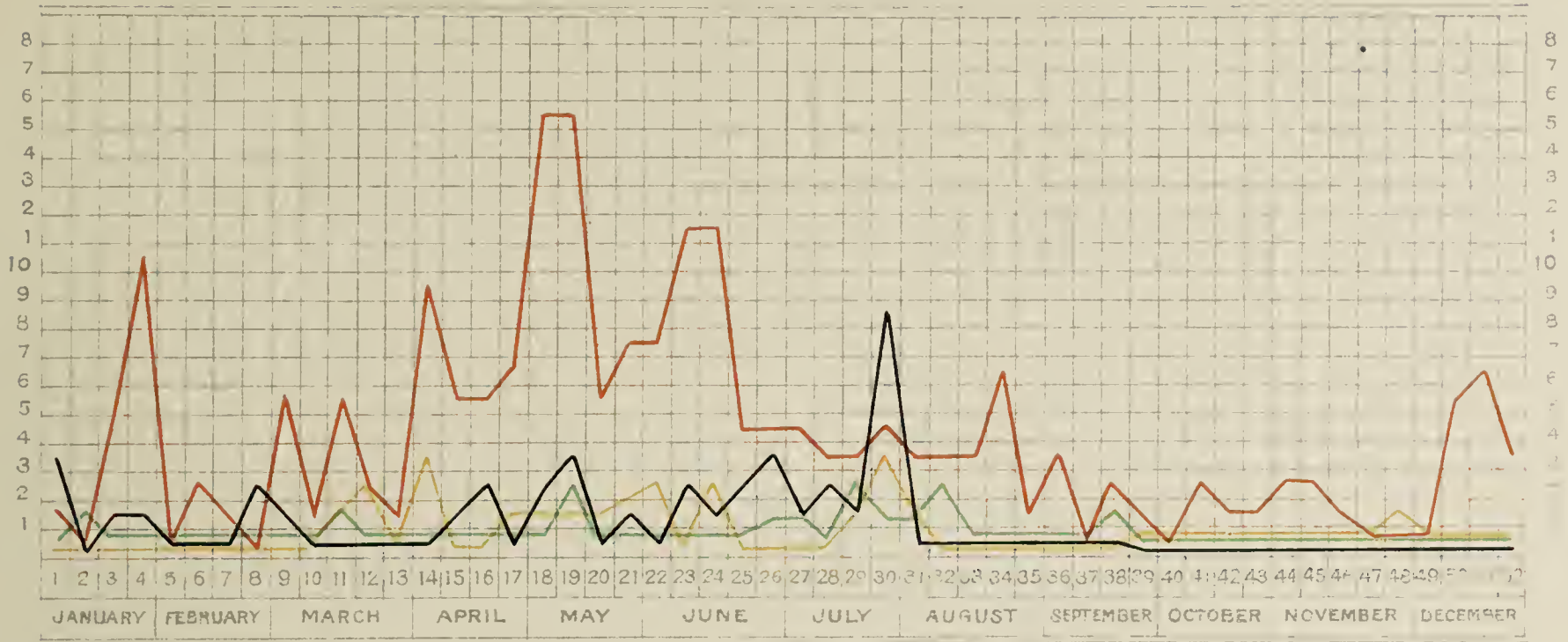
TABLE LVI.—TYPHUS FEVER CASE AND DEATH-RATES IN CAIRO DISTRICTS.

DISTRICT.	Number of Cases Recorded.	Cases Recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	6	0·245	4	0·163	66·6
Bab el Sha'ria ... ..	18	0·287	8	0·127	44·4
Ezbekia ... ..	8	0·154	4	0·077	50·0
'Abdîn ... ..	13	0·219	5	0·084	38·4
Sayeda Zenab ... ..	22	0·305	13	0·180	59·0
Khalifa ... ..	60	1·004	27	0·451	45·0
Helwân ... ..	1	0·117	—	—	—
Darb el Ahmar ... ..	26	0·349	16	0·214	61·5
Gamalia ... ..	66	1·007	56	0·855	84·8
Shubra ... ..	5	0·092	2	0·036	40·0
Bulâq ... ..	105	1·056	91	0·915	86·6
Old Cairo ... ..	7	0·200	1	0·028	14·2
Waily ... ..	14	0·236	5	0·084	35·7
TOTALS ... ..	351	0·483	232	0·319	66·0

There were 232 deaths from this disease during the year, the death-rate being therefore 0·319 per thousand living, as compared with 0·217 in 1913 and 0·265 in 1912. The proportion of deaths to cases recorded was 66·0 per cent, as against 72·2 per cent in 1913 and 80·6 per cent in 1912.

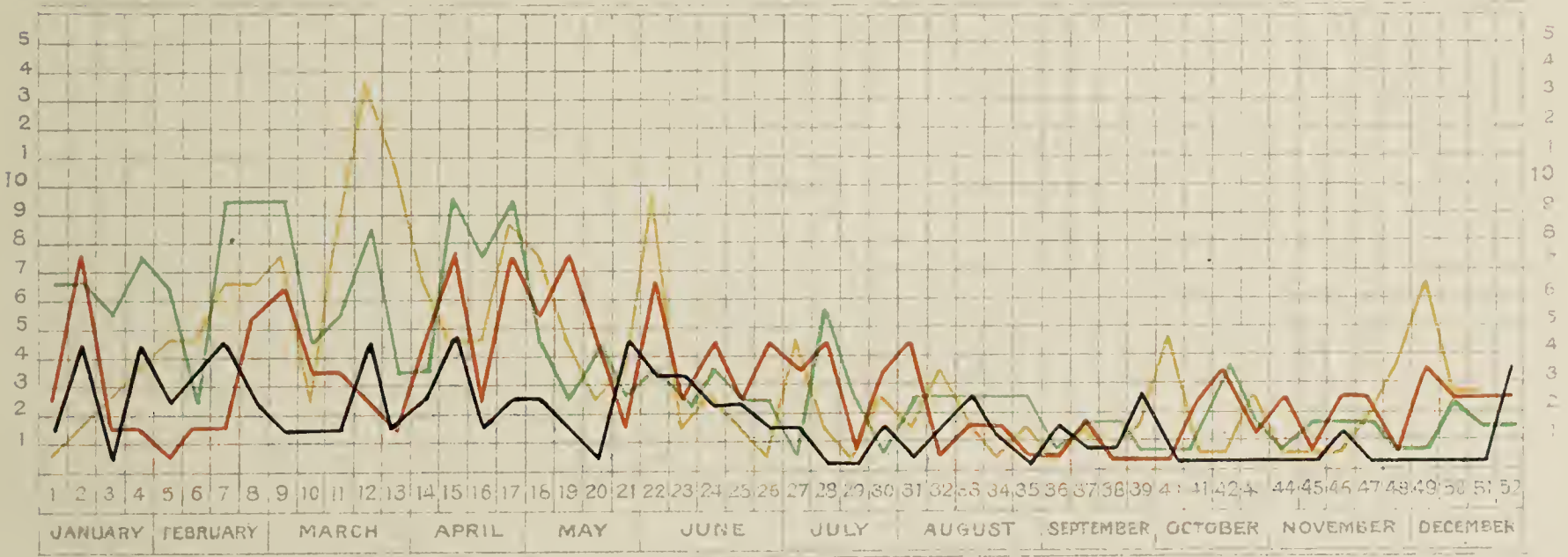


Weekly totals of Cases.  
RELAPSING FEVER.



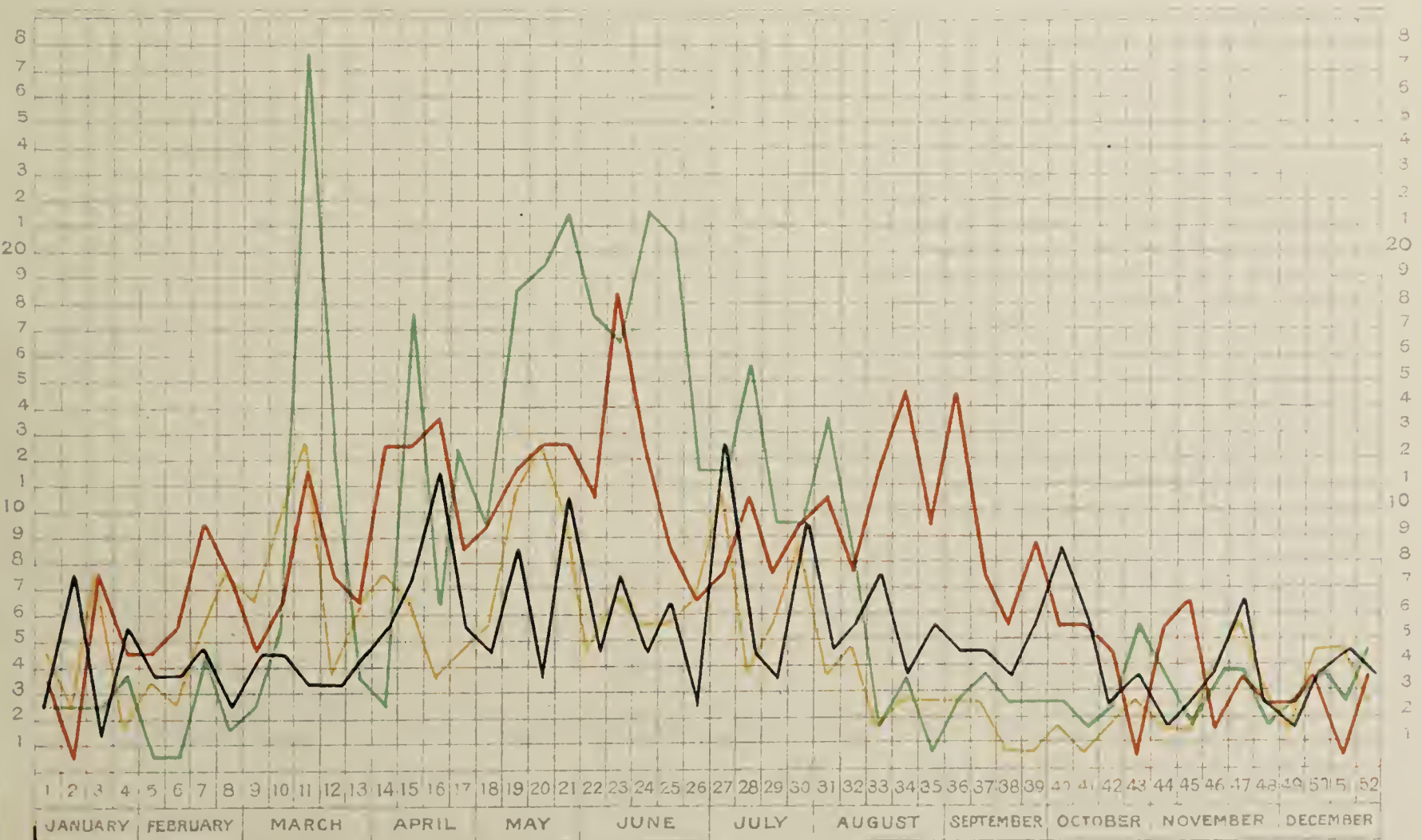
MENINGITIS.

Chart VI.



TYPHUS.

Chart VII.



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1911

1914

1912

1913





Figure 3

Cerebro Spinal Fever case and death rates in  
Cairo Districts in 1914 per 10,000 of population

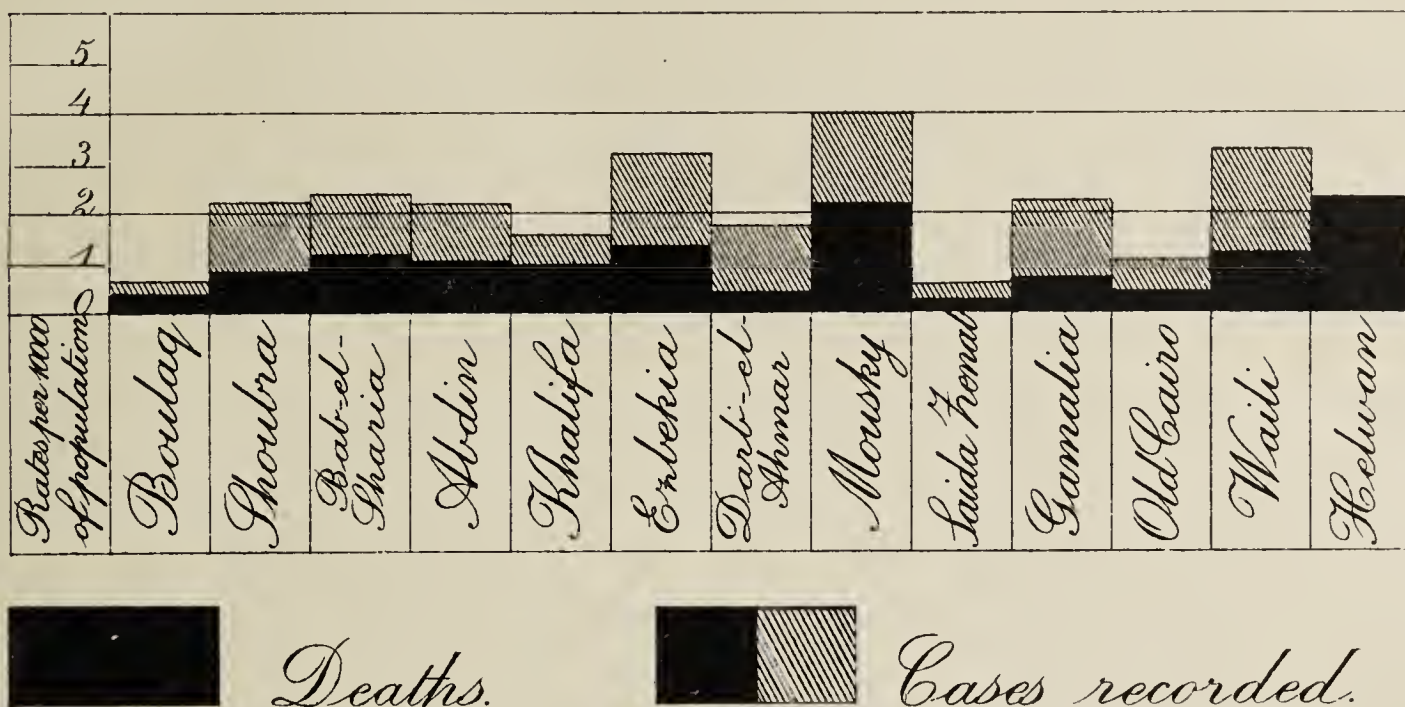


Figure 4

Typhus Fever case and death rates in  
Cairo Districts in 1914 per 10,000 of population







The morbidity and death-rates in the individual districts (Table LVI) varied considerably, being comparatively high in the Bulâq, Khalîfa, and Gamalîa districts, which showed rates for cases recorded of 1·056, 1·004, and 1·007 per thousand of population and death-rates of 0·915, 0·451, and 0·855 per thousand living respectively, and low in all the other districts. The difference in the case of the three districts mentioned in comparison with the others is markedly apparent in Figure 4 in which the rates of the districts are diagrammatically shown.

*Typhoid Fever* (Chart VIII).—In the report for the year 1913 attention was drawn to the increase in the number of cases of *typhoid fever* then recorded as compared with previous years. In the present year a still further increase is to be noted, the number of cases registered in 1914 being 1,409, as compared with 728 in 1913 and 453 in 1912. This increase may be clearly seen, at a glance, in Chart VIII, where the weekly totals of cases are shown for the present year for comparison with those of the three previous years. In making this comparison, however, it must not be forgotten that the figures given can be taken merely as an indication of the number of cases discovered, a different thing from the number of cases which occurred. In a previous part of the present report, when speaking of infectious disease generally, it was pointed out that, in a country such as this, where the proportion of undiscovered cases of infectious disease was extremely large, the number of infectious cases recorded in any year could not be taken as a measure of relative incidence for that year, if the proportion of cases likely to be voluntarily declared is interfered with by the application of any measures tending to result in an increased discovery of cases. In discussing this it was shown that a truer conception of incidence was generally speaking to be obtained from estimates based on the number of deaths, though, as was pointed out, comparison on this basis had its limitations. It was shown that in certain diseases, the increased discovery of cases during life caused an apparent increase in the number of deaths, and it is just in the disease now under discussion that the increased discovery of cases is more particularly likely to lead to an apparent increase in the number of deaths, since the aids to post-mortem diagnosis furnished by the presence of living cases in the same house or by characteristic external appearances after death are most likely to be found absent, in investigating the causes of death of previously unexamined persons dying from this disease. Any comparison therefore of the incidence of *typhoid fever*, based on estimates of the number of cases derived either from the cases recorded or from the deaths, is inadmissible. As these, however, are the only figures available, it results that no exact statistical comparison is properly speaking possible. In considering therefore the question as to whether the increased number of cases and deaths recorded in the present year should be taken as any indication of increase in the incidence of the disease, it is only possible to supply the general impressions derived from experience in dealing with the disease, supported by considerations based on the figures of the hospital-treated cases and by the lowered ratio of deaths to cases recorded.

During the course of 1913, circumstances had suggested a very considerable unrecorded prevalence of infectious diseases generally but more particularly of typhoid fever amongst the occupants of *eshash* and other similar insanitary and overcrowded residential conglomerations. With the object of dealing with this, during the present year instructions were issued to the District Medical Officers to keep under observation for varying periods according to circumstances all inhabitants of such domiciliary groups whenever infectious cases or suspicious deaths were met with. The result has been the early discovery in such localities of a large number of cases of typhoid fever, of which an unknown but certainly considerable proportion would otherwise never have been recorded. The extent of these discoveries may be gauged by the number of admissions into hospital, since the conditions of life were such in the localities from which the majority of cases was derived that whenever possible the patients were removed to hospital. During the year, therefore, 511 cases of typhoid fever were admitted into the Government Fever Hospital, as compared with 95



in the previous year. That the large number of admissions in 1914 is due principally to an increased use of the hospital for the treatment of such cases is shown by the fact that the 1914 admissions constituted 36 per cent of the total cases recorded, against 30 per cent in 1913. Taking the proportion of hospital admissions in 1913 as indicating the proportion of cases normally seeking hospital treatment, the number of admissions in 1914 would have been 183. If to this is added 98 exceptional cases derived from an outbreak of typhoid in one of the large public institutions of the city, we get a total of 281 cases which, deducted from the 511 admissions, leaves a surplus of 230 cases which may justifiably be considered as representing cases which, but for the added measures of control, would have been otherwise unrecorded. The additional hospital admissions, however, do not represent all the cases brought to light as a result of the measures adopted. No powers of compulsory isolation exist in the case of typhoid fever, and a considerable number of cases discovered living in poverty and squalor refused hospital treatment and had to be left where they were. The surroundings and home life of these cases are such that no measures of precaution can prevent the probability of direct transmission of the disease from case to case in the same house, and in many cases we had, perforce helplessly, to watch the course of small family outbreaks without being able to cut these short in the only efficient way, that is to say, by removal of the infected persons to hospital. The discovery of one case therefore may thus lead to the recording of several others, all of which might have been missed but for the methods of observation adopted. As it is impossible, however, to say as regards any individual case, whether it would or would not eventually have otherwise come to light, it is consequently impossible to express in exact figures the extent to which increased discovery has inflated the returns of this disease, but the circumstances under which most of these cases were found were such that in all likelihood very few of them would have become known but for the measures of observation adopted. The opinion is expressed therefore that as regards this year there is every reason to attribute the increase in the number of cases of this disease recorded to the additional discovery of cases and not to any increase in the actual incidence of the disease. Moreover, a still further increase in the number of recorded cases is, it is believed, to be expected in the future, and the difficulty may possibly then arise, if the increase in any year is considerable, of deciding whether this is to be considered as altogether due to improved discovery or whether it may not partly denote an increased incidence.

The 1,409 cases recorded in 1914 give a rate per thousand of the population of 1·941, as compared with 1·017 in 1913 and 0·642 in 1912. The highest incidence occurred at the end of March when 83 cases were recorded in one week. In Chart VIII is shown the seasonal prevalence of the disease compared with that of the three previous years.

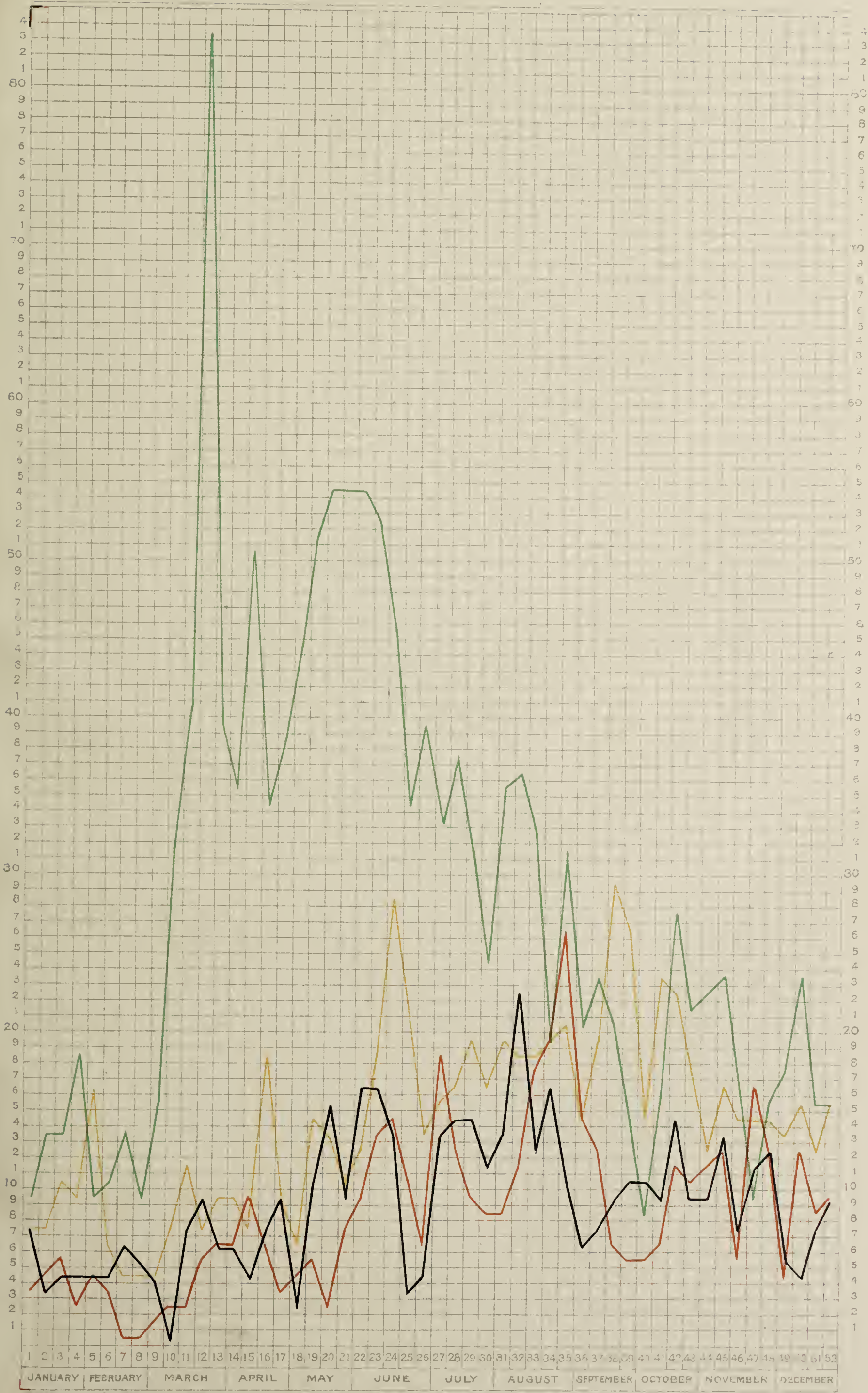
In the course of the year the disease accounted for 311 deaths, giving a death-rate from this cause of 0·428 per thousand living, as compared with rates of 0·313 and 0·248 in 1913 and 1912 respectively. The proportion of deaths to cases recorded was 22·0 per cent, as against 30·7 per cent in 1913 and 38·6 per cent in 1912.

In Table LVII the morbidity and death-rates are shown separately for the different districts. The highest incidence recorded was in Ezbekiâ district with a rate of 3·719 per thousand of the population; the lowest was in Old Cairo with 0·458. The highest death-rate was in 'Abdîn with a rate of 0·760 per thousand living and the lowest in Old Cairo with 0·057. The ratio of deaths to cases recorded was highest in Bulâq, being 40·6 per cent, showing the probability of the occurrence of a very considerable number of undiscovered cases in this district. In Figure 5 the case and death-rates for the individual districts are shown in a diagrammatic form.

During the year, in addition to the limited domiciliary outbreaks already referred ~~as~~ <sup>as</sup> occurring in the poorer quarters of the town and obviously due to direct infection from case to case, the incidence of the disease assumed, in one of the large public institutions



TYPHOID FEVER.  
Weekly totals of Cases.



Reproduced at the Survey Dept Cairo Nov 1915 (314-49)

1911

1914

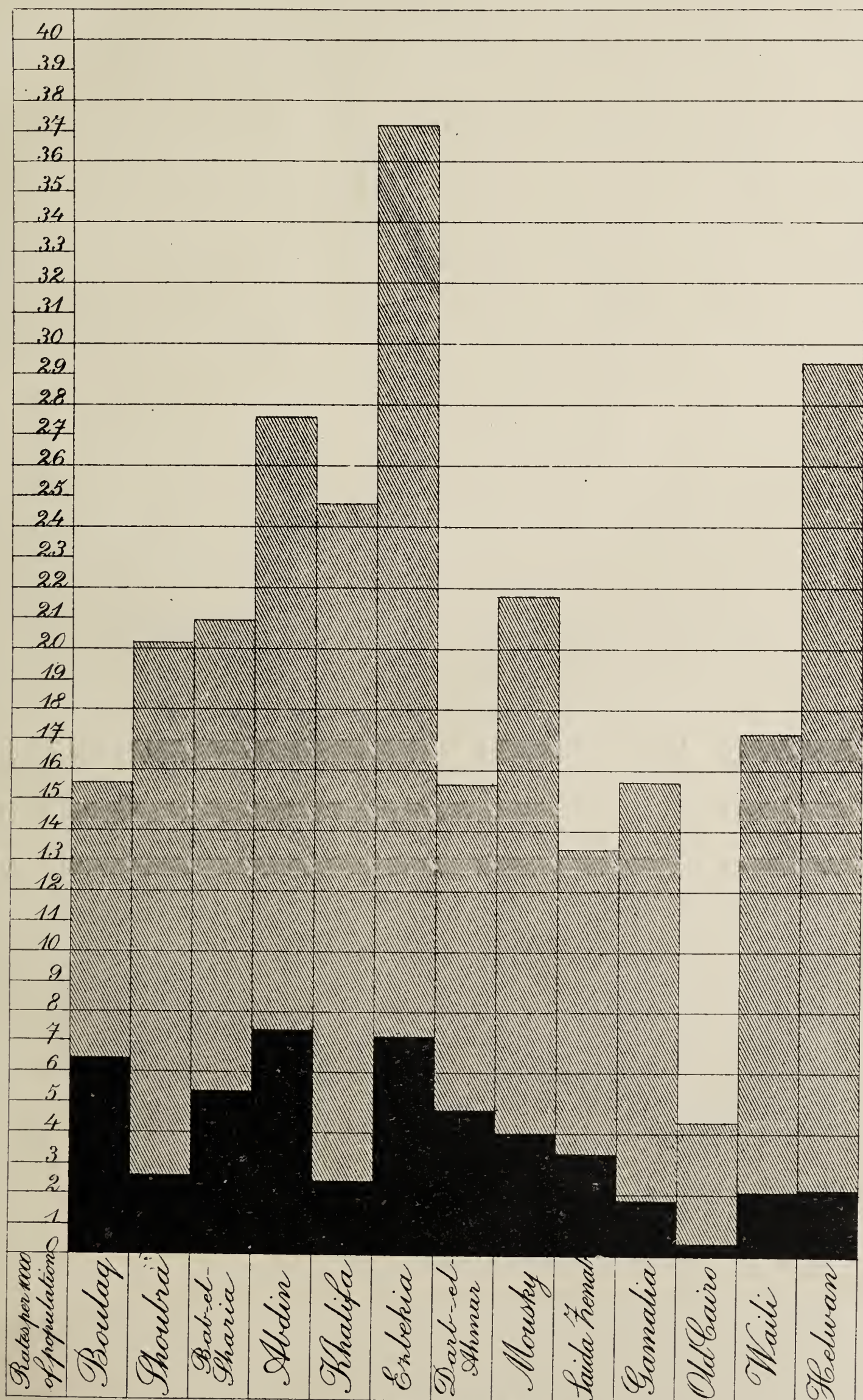
1912

1913





*Figure 5*  
*Typhoid Fever case and death rates in*  
*Cairo Districts in 1914 per 10,000 of population*



*Deaths.*



*Cases recorded.*





of the city, the form of a sharp localized epidemic which accounted for a total of 98 cases. The infection was traced to its source and the cause removed, upon which the outbreak rapidly declined.

TABLE LVII.—TYPHOID FEVER CASE AND DEATH-RATES IN CAIRO DISTRICTS.

DISTRICT.	Number of Cases Recorded.	Cases Recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	53	2·169	10	0·409	18·8
Bab el Sha'ria ... ..	131	2·091	34	0·542	25·9
Ezbekia ... ..	192	3·719	38	0·736	19·7
'Ab in ... ..	163	2·755	45	0·760	27·6
Sayeda Zenab ... ..	96	1·332	24	0·333	25·0
Khalifa ... ..	149	2·493	15	0·251	10·0
Helwân ... ..	25	2·949	2	0·235	8·0
Darb el Ahmar ... ..	116	1·558	37	0·497	31·8
Gamalia ... ..	102	1·557	12	0·183	11·7
Shubra ... ..	109	2·011	16	0·295	14·6
Bulâq ... ..	155	1·559	63	0·631	40·6
Old Cairo ... ..	16	0·458	2	0·057	12·5
Waily ... ..	102	1·722	13	0·219	12·7
TOTALS ... ..	1,409	1·941	311	0·428	22·0

In dealing with typhoid fever, as regards Cairo, experience has shown that a tendency occasionally exists for confusion to occur between this disease and typhus fever, and it is found that quite a considerable proportion of cases sent to the Fever Hospital with a diagnosis of “ typhus ” are in reality true cases of typhoid fever.

This, in part, no doubt can be explained by a confusion of nomenclature apt to result from the custom of employing the Continental terms *Typhus abdominalis* and *Typhus exanthemata* to designate typhoid and typhus fevers respectively, since the qualifying adjectives in the former terms are frequently omitted. In many cases, however, there has been a real mistake in diagnosis especially as regards native patients in whom the tendency to exaggerated nervous symptoms, the frequent absence of marked abdominal signs, and an occasional hæmorrhagic rash, are likely to give rise to error in diagnosis.

*Scarlet Fever* (Chart IX).—The number of cases of scarlet fever recorded during the year was extremely small. The total of the cases declared numbered 98, showing a rate of 0·135 case per thousand of population in 1914, as compared with rates of 0·233 and 0·151 in 1913 and 1912 respectively. The greatest incidence was in Ezbekia district with a rate of 0·406 per thousand of population. In Helwân no cases were reported during the year.

Of the total of 98 cases reported, 9 died, giving for 1914 a death-rate from this cause per thousand living of 0·012, as against 0·037 in 1913 and 0·032 in 1912. The highest death-rate from this cause occurred in the Musky district with 0·040 per thousand living.

The ratio of deaths to cases recorded was 9·1 per cent as against 16·1 per cent in 1913 and 21·5 per cent in 1912.

In Table LVIII the morbidity and death-rates of the various districts are given with the case-mortality in each.

*Diphtheria* (Chart X).—During 1914, there were recorded 1,412 cases of diphtheria, giving a morbidity-rate of 1·945 cases per thousand of population, as compared with rates of 1·827 and 1·573 for 1913 and 1912 respectively. Of the 1,412 cases recorded, 685 died, making the death-rate from this disease 0·943 per thousand living, as compared with 0·785 in 1913 and 0·748 in 1912. The ratio of deaths to cases recorded was 48·5 per cent, as compared with 42·9 per cent in 1913 and 47·6 per cent in 1912, an increase in the ratio for



this year which, as already pointed out, may be taken as an indication of a falling off in the proportion of cases discovered. The incidence of the disease was, as usual, most marked in the autumn, it having attained its acme at the end of October. The seasonal prevalence,

TABLE LVIII.—SCARLET FEVER CASE AND DEATH-RATES IN CAIRO DISTRICTS.

DISTRICT.	Number of Cases Recorded.	Cases Recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	6	0·245	1	0·040	16·6
Bab el Sha'ria ... ..	5	0·079	—	—	—
Ezbekia ... ..	21	0·406	1	0·019	4·7
'Abdin ... ..	11	0·185	1	0·016	9·0
Sayeda Zenab ... ..	8	0·111	—	—	—
Khalifa ... ..	8	0·133	2	0·033	25·0
Helwan ... ..	—	—	—	—	—
Darb el Ahmar ... ..	7	0·094	—	—	—
Gamalia ... ..	4	0·061	—	—	—
Shubra ... ..	11	0·203	1	0·018	9·0
Bulâq ... ..	8	0·080	1	0·010	12·5
Old Cairo ... ..	1	0·028	1	0·028	100·0
Waily ... ..	8	0·135	1	0·016	12·5
TOTALS ... ..	98	0·135	9	0·012	9·1

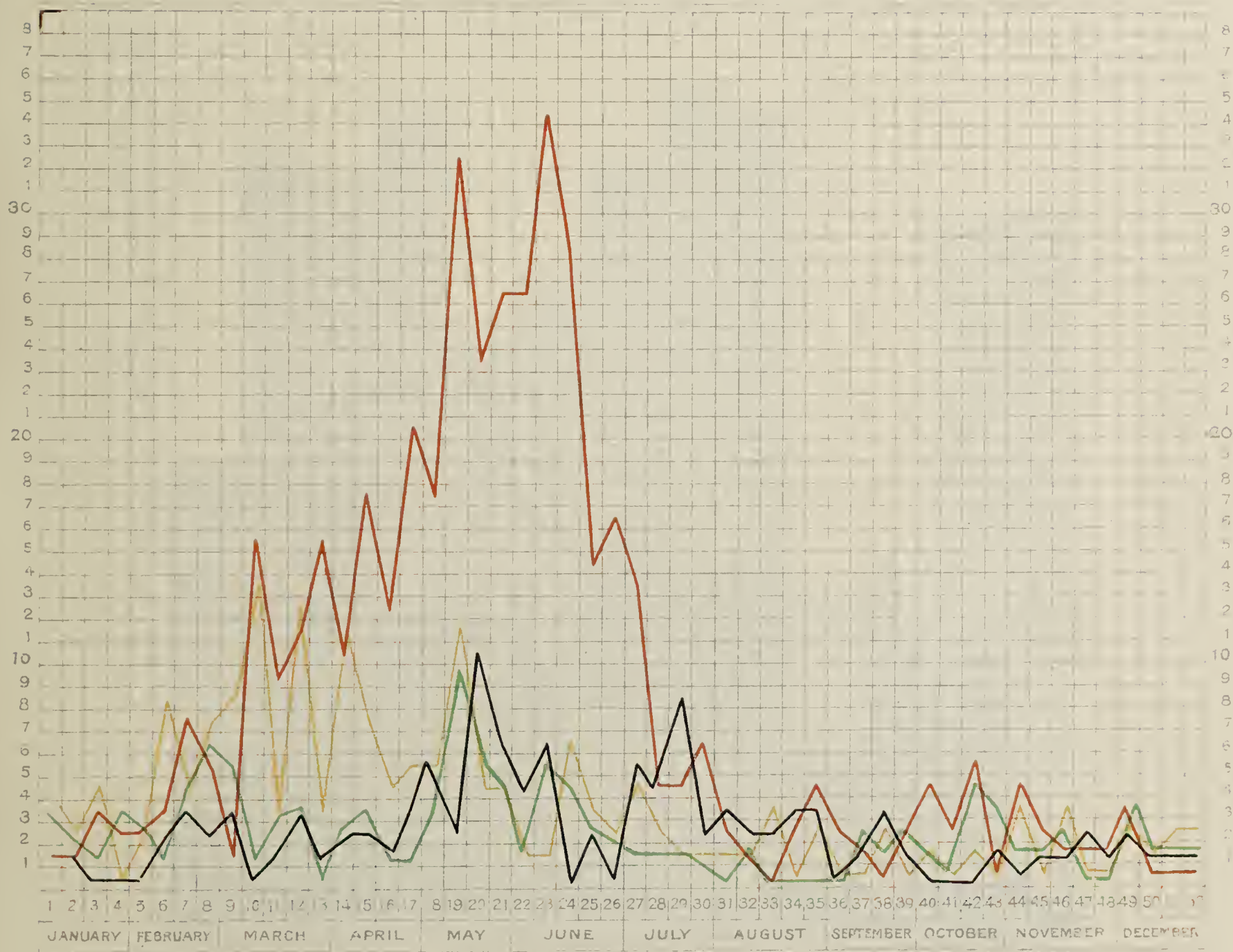
as indicated by the weekly totals of cases, is shown in Chart X in comparison with the three previous years. In Table LIX are shown the district distributions of the cases and deaths from this disease with the case-mortality in each. The highest incidence occurred in the Musky district with a morbidity-rate of 2·497 per thousand of population; the lowest was in Gamalia with 1·053. The highest death-rate occurred in Bab el Sha'ria with 1·325 deaths from this cause per thousand of population. The lowest was in Helwan with a death-rate of 0·235 per thousand. In Figure 6 the morbidity and death-rates of the various districts are shown in a diagrammatic form.

TABLE LIX.—DIPHTHERIA CASE AND DEATH-RATES IN CAIRO DISTRICTS.

DISTRICT.	Number of Cases Recorded.	Cases Recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	61	2·497	27	1·105	44·2
Bab el Sha'ria ... ..	138	2·203	83	1·325	60·1
Ezbekia ... ..	101	1·956	45	0·871	44·5
'Abdin ... ..	145	2·450	58	0·980	40·0
Sayeda Zenab ... ..	175	2·428	82	1·137	46·8
Khalifa ... ..	106	1·774	58	0·970	54·7
Helwan ... ..	18	2·123	2	0·235	11·1
Darb el Ahmar ... ..	170	2·283	92	1·235	54·1
Gamalia ... ..	69	1·053	38	0·580	55·0
Shubra ... ..	125	2·306	56	1·033	44·8
Bulâq ... ..	139	1·398	60	0·603	43·1
Old Cairo ... ..	40	1·146	32	0·917	80·0
Waily ... ..	125	2·111	52	0·878	41·6
TOTALS ... ..	1,412	1·945	685	0·943	48·5

*Measles* (Chart XI).—During 1914, the incidence of measles was low, the number of cases recorded being 469, giving a rate of recorded cases per thousand of population of 0·646 as compared with 1·518 in 1913 and 1·085 in 1912. The largest district rate was recorded in Shubra with 1·347 cases per thousand of population; the lowest was in Gamalia with 0·167

SCARLET FEVER.  
Weekly totals of Cases.



Reproduced with the Sankey-Lewis Co. (1914-15)

1911 —————

1914 —————

1912 —————

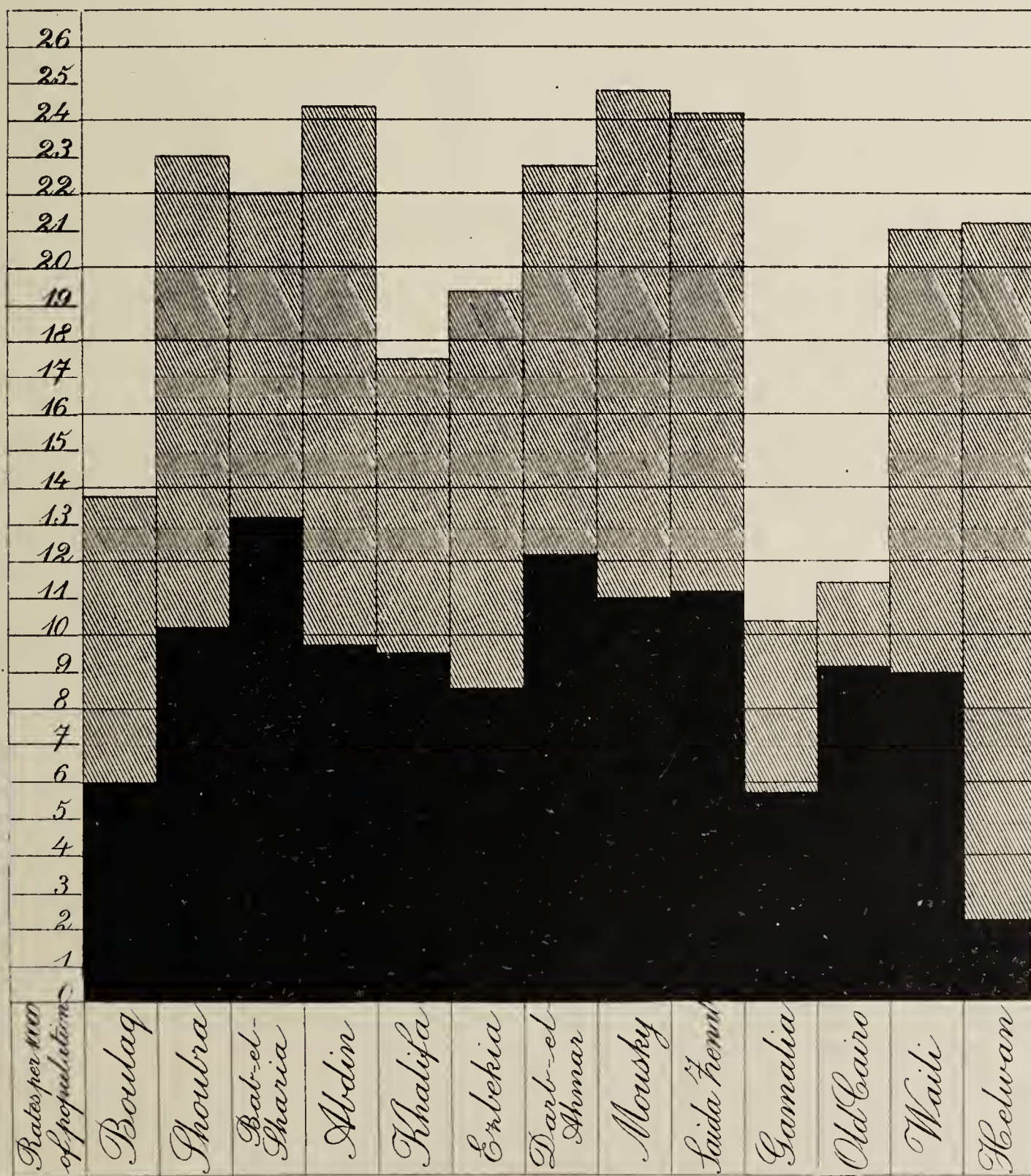
1913 —————





Figure 6

Diphtheria case and death rates in  
Cairo Districts in 1914 per 10,000 of population



Deaths.



Cases recorded.





case per thousand living. The highest weekly numbers of cases recorded were in the first week of April and the first week of June. The seasonal incidence of the disease in 1914 is shown in Chart XI in comparison with that of the three previous years. Of the 469 cases recorded, 124 died, giving a death-rate for measles of 0·170 per thousand of the population, as against 0·564 in 1913 and 0·507 in 1912. The highest district death-rate occurred in Shubra with 0·664 death from measles per thousand living. No deaths occurred in Helwân, Darb el Ahmar, or Waily.

TABLE LX.—MEASLES CASE AND DEATH-RATES IN CAIRO DISTRICTS.

DISTRICT.	Number of Cases Recorded.	Cases Recorded per Thousand of Population.	Number of Deaths.	Death-rate per Thousand of Population.	Ratio of Deaths to Cases Recorded per Cent.
Musky ... ..	22	0·900	1	0·040	4·5
Bab el Sha'ria ... ..	18	0·287	4	0·063	22·2
Ezbekia ... ..	38	0·736	5	0·096	13·1
'Abdin ... ..	70	1·183	1	0·016	1·4
Sayeda Zenab ... ..	72	0·999	17	0·235	23·6
Khalifa ... ..	32	0·535	26	0·435	81·2
Helwân ... ..	2	0·235	—	—	—
Darb el Ahmar ... ..	19	0·255	—	—	—
Gamalia ... ..	11	0·167	2	0·030	18·1
Shubra ... ..	73	1·347	36	0·664	49·3
Bulâq ... ..	66	0·664	24	0·241	36·3
Old Cairo ... ..	11	0·315	8	0·229	72·7
Waily ... ..	35	0·591	—	—	—
TOTALS ... ..	469	0·646	124	0·170	26·4

The ratio of deaths to cases recorded was 26·4 per cent, as against 37·1 per cent in 1913 and 48·1 per cent in 1912.

The district case and death-rates are shown in Table LX together with the ratios of deaths to cases recorded in each. The high proportion of deaths, to cases recorded generally, indicates an extremely unsatisfactory notification of measles. In some of the districts this is extremely bad, as in Khalifa and Old Cairo in which every 81·2 and 72·7 deaths respectively fall to be accounted for from only a hundred cases recorded. The mildness of the disease and the comparative rarity with which medical attendance is called for renders it almost a matter of impossibility in Cairo to obtain any record of more than a trivial fraction of the total number of cases which occur.

In Figure 7 the district morbidity and death-rates are shown in a diagrammatic form.

*Puerperal Fever.*—During 1914, 48 deaths from puerperal fever were reported, giving a death-rate for this disease of 0·066 per thousand of the population, or, calculated on the number of births, a maternal death-rate from this cause of 1·532 per thousand childbirths. In comparison with other countries this is remarkably low, which is all the more surprising when the conditions under which most of the confinements take place, and the ignorance of the attendants in the great majority of cases, are remembered. In addition to the 48 deaths declared as from puerperal fever, 30 otherwise certified deaths of puerperal women occurred within a period of fifteen days following their confinements. The causes of death of these cases were certified as follows: 10 postpartum hæmorrhage, 9 eclampsia, 6 result of difficult labour, 1 heart disease, 1 acute metritis, 1 uræmia, 1 tuberculosis, 1 peritonitis. Of these, the cases of metritis and peritonitis should probably, properly speaking, have been included as puerperal fever. Their inclusion, however, would not materially affect the issue, and even if we consider all these cases to have been possibly, in reality, cases of puerperal fever, the result will still compare



favourably with other countries since the 78 maternal deaths, if all were considered as puerperal fever, would give only a death-rate of 0·107 per thousand of the population, or, calculated on the births, a rate of 2·490 maternal deaths per thousand births.

(d) DISINFECTION SERVICE.

During 1914, 17,833 rooms and their contents were disinfected by the two disinfection services of Abbassîa and Fum el Khalîg, 7,847 being effected by the former and 9,986 by the latter. This gives a daily average of 21·5 rooms disinfected by the Abbassîa Service and 27·3 by the Fum el Khalîg Service. Of the rooms disinfected by the Abbassîa Service, 696 were disinfected with formaline, equivalent to a daily average of 1·90, and 7,144 with sublimate solution, being a daily average of 19·57. In addition to these, 7 rooms were disinfected with sulphur by the Abbassîa Service in an attempt to eke out the supply of formaline of which a shortage threatened owing to the initial interference of the war with its replenishment. The results, however, were not satisfactory, and the fact that the threatened formaline famine failed to materialize enabled us to dispense with the method.

Of the 9,986 rooms disinfected by the Fum el Khalîg Service, 573, equivalent to a daily average of 1·57, were disinfected by formaline, whilst 9,413, equivalent to a daily average of 25·78, were done with sublimate solution.

In addition to these house disinfections, 163,301 articles of clothing were removed by the two Services for steam disinfection at the stations. Of these, 113,902 were disinfected at the Abbassia Station and 49,399 at the Fum el Khalîg Station.

This is equivalent to a daily average of 312·1 articles disinfected at Abbassîa Station and 135·3 at Fum el Khalîg. The daily average of work therefore is, for Abbassîa, 1·90 rooms and their contents disinfected by formaline, 19·57 rooms disinfected by sublimate, and 312·1 articles removed to the station for steam disinfection; and for Fum el Khalîg 1·57 rooms disinfected with formaline, 25·78 rooms disinfected with sublimate, and 135·3 articles disinfected at the station.

In every direction, therefore, as is to be expected from the larger number of cases dealt with during the year, there has been a considerable increase in the amount of disinfection work carried out by the Disinfecting Services, there being dealt with in 1914 a daily average of 48·8 rooms and 447·4 articles as against 28·3 rooms and 222·8 articles in 1913.

(e) FEVER HOSPITAL.

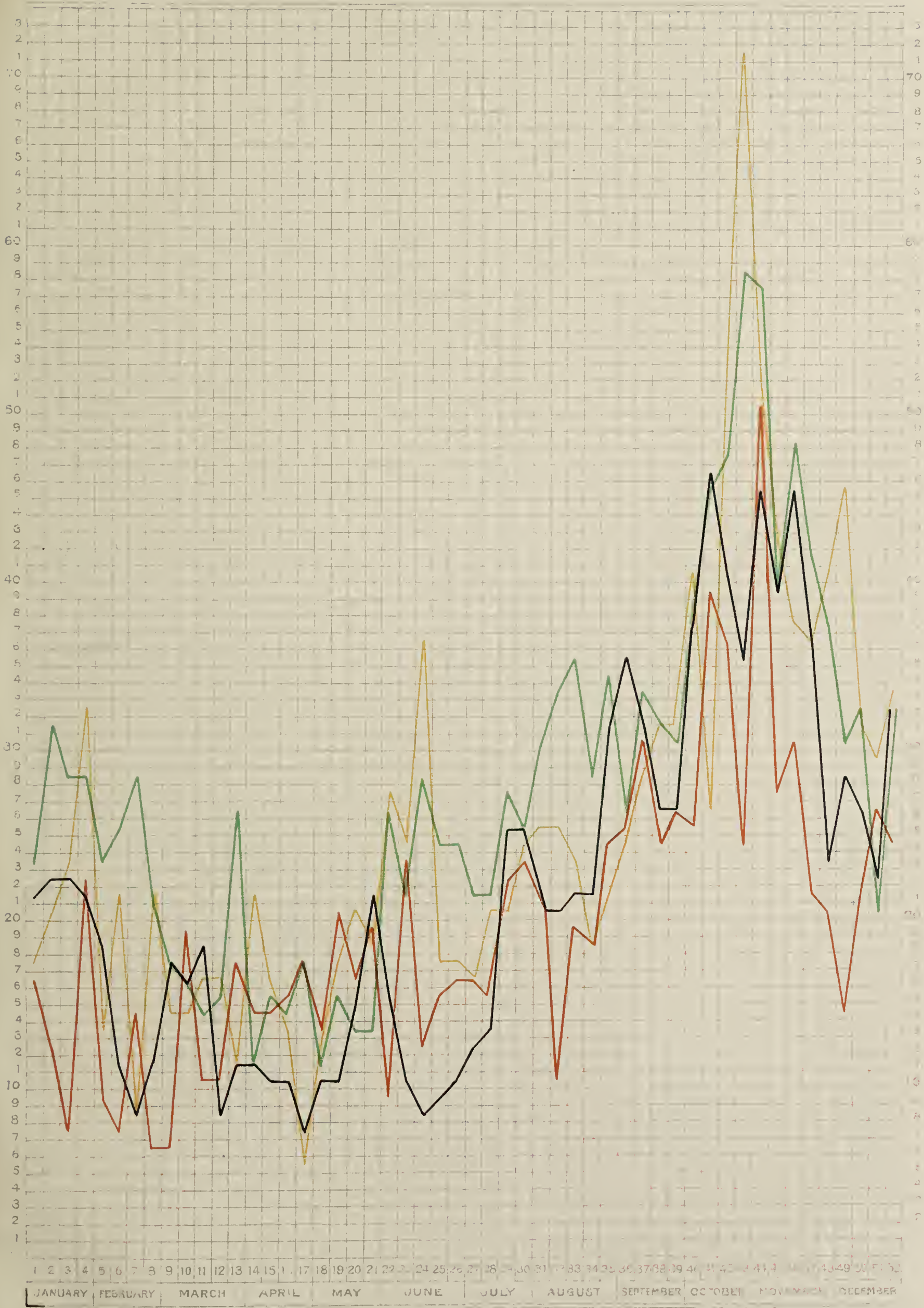
During the year there were 2,348 admissions to the Government Fever Hospital at Abbassîa (*see* Tables LXI and LXII), as compared with 1,085 in 1913. Of these admissions, 1,473 were males and 875 females.

The number of persons admitted in each month were 166 in January, 175 in February, 389 in March, 295 in April, 349 in May, 230 in June, 174 in July, 105 in August, 89 in September, 146 in October, 119 in November, and 111 in December.

The admissions consisted of 587 cases of smallpox, 11 of chicken-pox, 28 measles, 7 scarlet fever, 511 typhoid fever, 65 typhus fever, 10 relapsing fever, 58 cerebro-spinal fever, 91 diphtheria, 20 mumps, 70 erysipelas, 1 bubonic plague, and 889 cases composed of 497 patients sent to hospital under erroneous diagnoses, 167 persons under observation in whom no disease ever manifested itself and 225 mothers and other females accompanying patients. The 497 patients sent to hospital under mistaken diagnoses were found on examination to consist of one case of Malta fever, 30 cases of malaria; 171 of influenza, 59 three-days' fever, 40 seven days' fever, 2 puerperal fever, 3 rheumatic fever, 4 tetanus, 4 pulmonary tuberculosis, 1 general tuberculosis, 43 pneumonia, 18 bronchitis, 16 tonsillitis, 17 gastro-enteritis, 3 septic inflammation of glands, 18 septic wounds, 2 dysentery, 59 various skin diseases, 4 insanity, 1 cancer, and 1 empyæma.



DIPHTHERIA.  
Weekly totals of Cases.



Reproduced at the Survey Dept. Canada Nov. 1915 (314-49)

1911 —————

1914 —————

1912 —————

1913 —————





MEASLES.  
Weekly totals of Cases.



Reproduced at the Survey Dept Cairo Nov 1915 (314-49)

1911 ———

1914 ———

1912 ———

1913 ———





TABLE LXI.—GOVERNMENT FEVER HOSPITAL. MALE AND FEMALE PATIENTS ADMITTED EACH MONTH AND THE DISEASES FOR WHICH THEY WERE ADMITTED.

MONTH.	SEX.	Smallpox.	Chicken-pox.	Measles.	Scarlet Fever.	Typhoid Fever.	Typhus Fever.	Relapsing Fever.	Cerebro-spinal Fever.	Diphtheria.	Mumps.	Bubonic Plague.	Erysipelas.	Other Diseases.	Observation Cases.	Persons accompanying Sick.	TOTALS.
January ... {	Male ...	49	—	—	—	5	2	—	4	3	1	—	5	15	11	—	95
	Female	32	1	—	—	1	—	—	1	2	1	—	2	1	1	29	71
February ... {	Male ...	41	1	—	1	2	1	1	11	4	—	1	6	19	5	—	93
	Female	21	2	2	—	2	1	—	—	7	1	—	1	6	5	34	82
March... ... {	Male ...	53	—	1	—	38	7	1	10	3	1	—	5	21	10	—	150
	Female	37	—	—	2	95	30	—	1	5	1	—	—	24	10	34	239
April ... ... {	Male ...	64	1	1	—	57	4	—	9	3	—	—	7	32	21	—	199
	Female	40	—	—	—	23	—	—	1	—	—	—	2	3	6	21	96
May ... ... {	Male ...	68	1	—	1	60	3	1	3	2	2	—	4	45	13	—	203
	Female	52	—	6	2	25	—	—	2	2	—	—	—	16	6	35	146
June ... ... {	Male ...	38	1	—	1	32	1	1	6	3	2	—	6	48	19	—	158
	Female	21	2	1	—	18	—	—	—	2	1	—	2	13	1	11	72
July ... ... {	Male ...	22	1	1	—	28	4	5	4	3	2	—	14	27	15	—	126
	Female	14	—	2	—	7	1	—	—	1	—	—	2	5	6	10	48
August ... {	Male ...	12	—	—	—	26	1	1	—	5	—	—	6	17	7	—	75
	Female	8	—	—	—	7	—	—	—	3	—	—	—	3	—	9	30
September ... {	Male ...	5	—	—	—	29	—	—	1	12	2	—	1	20	2	—	72
	Female	—	—	—	—	2	—	—	—	2	—	—	—	3	2	8	17
October ... {	Male ...	2	—	1	—	15	2	—	1	7	2	—	1	74	9	—	114
	Female	2	—	1	—	1	—	—	—	6	—	—	3	4	2	13	32
November ... {	Male ...	—	—	1	—	12	3	—	—	7	1	—	1	73	8	—	106
	Female	—	—	—	—	—	—	—	1	3	—	—	—	1	—	8	13
December ... {	Male ...	5	1	11	—	18	4	—	2	4	3	—	2	24	8	—	82
	Female	1	—	—	—	8	1	—	1	2	—	—	—	3	—	13	29
1914 ... ... {	Male ...	359	6	16	3	322	32	10	51	56	16	1	58	415	128	—	1,473
	Female	228	5	12	4	189	33	—	7	35	4	—	12	82	39	225	875
TOTALS ... ..		587	11	28	7	511	65	10	58	91	20	1	70	497	167	225	2,348

Of the 2,348 admissions, 23 were first class, 116 second class, and 2,209 third class patients.

The admissions from the eight principal notifiable diseases alone (smallpox, measles, scarlet fever, diphtheria, typhoid fever, typhus fever, relapsing fever, and cerebro-spinal fever) were 1,357, or a general percentage based on the total of 4,878 cases recorded in the City during the year, of 27·8 per cent of admissions, as compared with 10·8 per cent in 1913.

In Table LXIII, the absolute and relative admissions in 1914 and 1913 are shown in the case of these eight principal diseases, and from this it will be seen that not only have the actual numbers of hospital cases increased in 1914 but the ratio of admissions to total cases recorded also shows a very considerable augmentation.

This relative as well as absolute increase in the present year has already been referred to in the case of typhoid fever in speaking of that disease, and the same factor, given as operating in the production of the increase in the case of typhoid, is to be taken as the causal agent in the augmentations to be seen in the admission figures of the other diseases. That is to say, the additional cases discovered amongst the necessitous poor from the institution



TABLE LXII.—GOVERNMENT FEVER HOSPITAL. ADMISSIONS BY CLASSES PER MONTH  
AND THE DISEASES FOR WHICH THEY WERE ADMITTED.

MONTH.	CLASS.	Smallpox.	Chicken-pox.	Measles.	Scarlet Fever.	Typhoid Fever.	Typhus Fever.	Relapsing Fever.	Cerebro-Spinal Fever.	Diphtheria.	Mumps.	Bubonic Plague.	Erysipelas.	Other Diseases.	Observation Cases.	Persons accompanying Sick.	TOTALS.
January ...	First ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Second	5	—	—	—	—	—	—	1	1	—	—	2	—	—	—	9
	Third...	75	1	—	—	6	2	—	4	4	2	—	5	16	12	29	156
February	First ...	2	1	1	—	—	—	—	—	1	—	—	—	—	—	—	5
	Second	7	1	—	1	—	—	—	—	1	—	—	1	—	1	5	17
	Third...	53	1	1	—	4	2	1	11	9	1	1	6	25	9	29	153
March ...	First ...	1	—	—	—	1	1	—	—	2	—	—	1	—	—	—	6
	Second	12	—	—	—	—	—	—	1	—	—	—	—	—	—	4	17
	Third...	77	—	1	2	132	36	1	10	6	2	—	4	45	20	30	366
April ...	First ...	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4
	Second	7	1	1	—	1	—	—	1	—	—	—	1	1	—	3	16
	Third...	93	—	—	—	79	4	—	9	3	—	—	8	34	27	18	275
May... ..	First ...	2	—	—	—	1	—	—	—	1	—	—	—	—	—	—	4
	Second	15	—	2	—	—	—	—	—	1	—	—	—	2	—	3	23
	Third...	103	1	4	3	84	3	1	5	2	2	—	4	59	19	32	322
June ...	First ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Second	10	—	—	—	1	—	—	—	—	—	—	—	—	—	—	11
	Third...	48	3	1	1	49	1	1	6	5	3	—	8	61	20	11	218
July ...	First ...	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Second	2	—	—	—	—	1	—	—	—	—	—	1	1	—	—	5
	Third...	33	1	3	—	35	4	5	4	4	2	—	15	31	21	10	168
August ...	First ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Second	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1
	Third...	19	—	—	—	33	1	1	—	8	—	—	6	20	7	9	104
September	First ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Second	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Third...	5	—	—	—	31	—	—	1	14	2	—	1	23	4	8	89
October ...	First ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Second	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Third...	4	—	2	—	16	2	—	1	13	2	—	4	78	11	13	146
November	First ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Second	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	2
	Third...	—	—	1	—	12	3	—	—	9	1	—	1	74	8	8	117
December	First ...	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1
	Second	2	—	10	—	—	—	—	—	—	—	—	—	1	—	2	15
	Third...	4	1	—	—	26	5	—	3	6	3	—	2	26	8	11	95
1914...	First ...	12	1	2	—	2	1	—	—	4	—	—	1	—	—	—	23
	Second	61	2	13	1	2	1	—	4	4	—	—	5	5	1	17	116
	Third...	514	8	13	6	507	63	10	54	83	20	1	64	492	166	208	2,209
TOTALS... ..		587	11	28	7	511	65	10	58	91	20	1	70	497	167	225	2,348

*Figure 7*  
*Measles case and death rates in*  
*Cairo Districts in 1914 per 10,000 of population*

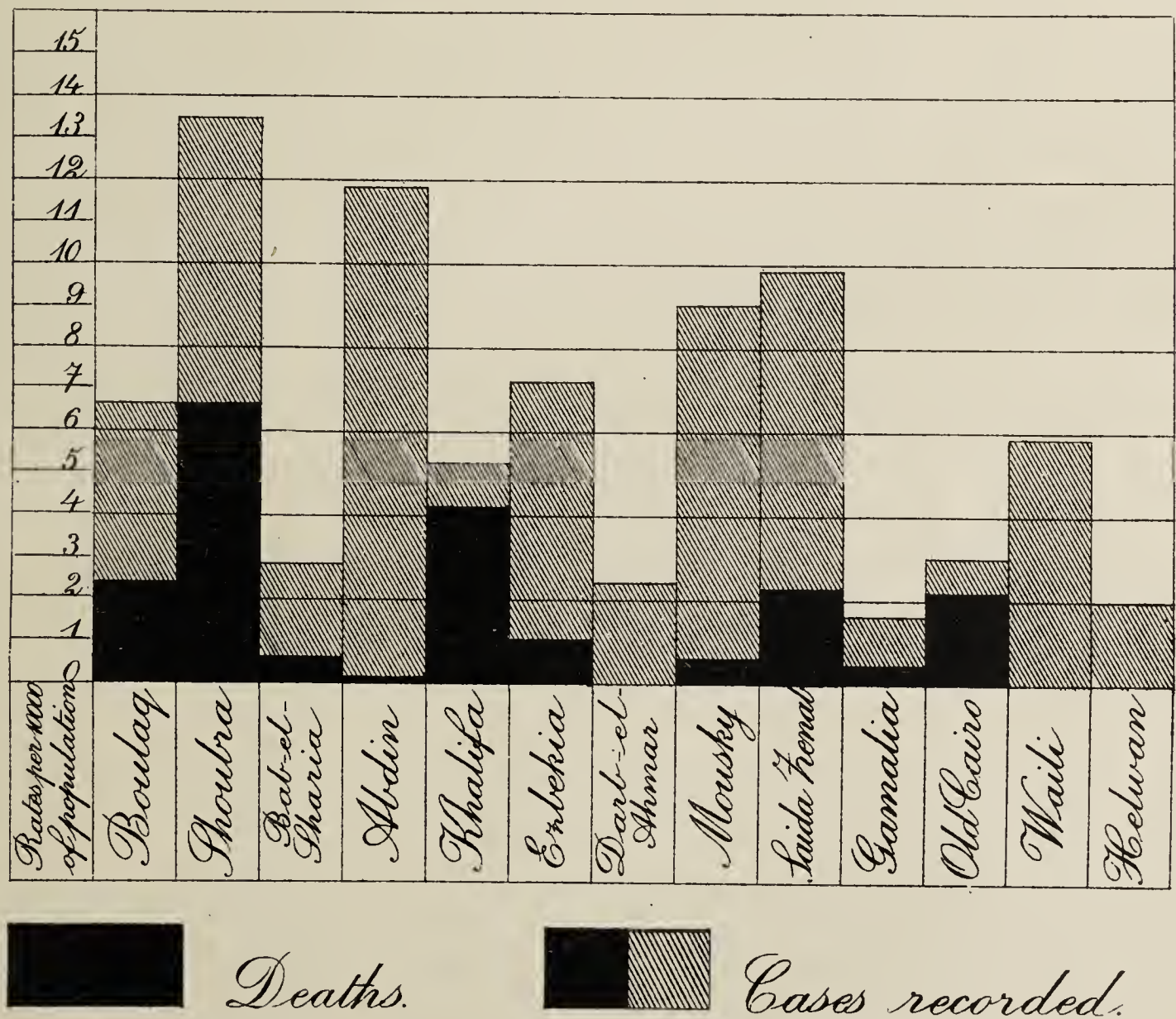






TABLE LXIII.—GOVERNMENT FEVER HOSPITAL. CASES RECORDED AND ADMISSIONS TO HOSPITAL DURING 1913 AND 1914 FROM THE EIGHT PRINCIPAL NOTIFIABLE DISEASES.

DISEASE.	1913.			1914.		
	Total Cases Recorded.	Number of Admissions to Hospital.	Percentage of Total Cases Admitted to Hospital.	Total Cases Recorded.	Number of Admissions to Hospital.	Percentage of Total Cases Admitted to Hospital.
Smallpox ... ..	276	125	45·2	983	587	59·7
Measles ... ..	1,087	20	1·8	469	28	5·9
Scarlet fever ... ..	167	11	6·5	98	7	7·1
Diphtheria ... ..	1,308	76	5·8	1,412	91	6·4
Typhoid fever ... ..	728	95	13·0	1,409	511	36·2
Typhus fever ... ..	216	42	19·4	351	65	18·5
Relapsing fever ... ..	21	18	85·7	10	10	100·0
Cerebro-spinal fever ... ..	152	44	28·9	146	58	39·7
TOTALS ... ..	3,955	431	10·8	4,878	1,357	27·8

of a vigilant observation of insalubrious and overcrowded areas, whenever grounds of suspicion exist for this, is to be taken as the explanation of both the absolute and relative increase in the admissions in the case of all these diseases since not only does each discovered case sent to hospital swell the absolute number of admissions, but, amongst such cases, the impossibility of effective home isolation, leading, as it does, to a minimum of cases being left at home, results in a swelling of the hospital admissions out of proportion to the total increase in the cases recorded. There were 304 deaths in the hospital during the year (see Table LXIV).

TABLE LXIV.—GOVERNMENT FEVER HOSPITAL. MONTHLY MORTALITY AND CAUSES OF DEATH.

MONTH.	Smallpox.	Scarlet Fever.	Typhoid Fever.	Typhus Fever.	Cerebro-Spinal Fever.	Diphtheria.	Erysipelas.	Other Diseases.	TOTALS.
January ... ..	14	—	—	—	2	1	1	2	20
February ... ..	9	—	—	1	4	3	2	2	21
March ... ..	4	—	6	11	5	1	—	4	31
April ... ..	16	—	9	4	5	2	—	2	38
May... ..	29	1	13	3	4	—	—	11	61
June ... ..	9	—	15	—	6	2	1	9	42
July... ..	10	—	3	2	4	—	1	5	25
August ... ..	3	—	6	2	—	3	—	3	17
September ... ..	1	—	2	—	—	10	1	—	14
October ... ..	—	—	1	—	1	8	—	1	11
November ... ..	—	—	2	—	—	7	—	—	9
December ... ..	1	—	5	1	1	4	1	2	15
TOTALS ... ..	96	1	62	24	32	41	7	41	304

Of these, 96 were caused by smallpox, 1 by scarlet fever, 62 by typhoid fever, 24 by typhus fever, 32 by cerebro-spinal meningitis, 41 by diphtheria, 7 by erysipelas, and 41 by various non-infectious diseases in the case of patients mistakenly admitted to the hospital under cover of a wrong diagnosis. The details of the 41 non-infectious deaths are 10 from septicæmia, 1 from tetanus, 8 from acute gastro-enteritis, 2 acute mania, 18 double pneumonia, 1 cerebral hæmorrhage, and 1 arterio-sclerosis. These cases had been sent to the hospital as cases of infectious disease and there found to be too ill to bear further transportation to a general hospital.



The infectious deaths give case-mortalities of 16·3 per cent in smallpox, 14·2 per cent in scarlet fever, 12·1 per cent in typhoid fever, 55·1 per cent in cerebro-spinal fever, 36·9 per cent in typhus fever, 45·0 per cent in diphtheria, and 10·0 per cent in erysipelas. Of the 511 cases of typhoid fever admitted to the hospital, 82 cases were treated with typhoid vaccine. Of these, 3 died, giving a case-mortality for the vaccine-treated cases of 3·6 per cent. Of 423 cases not treated by vaccine, 59 died, giving a case-mortality of 13·9 per cent. The remaining 6 cases were still under treatment at the end of the year.

The hospital case-mortality of diphtheria is very high, a circumstance due, as pointed out in the last report, to the fact that admissions for this disease are largely composed of very advanced cases in which treatment has been too long delayed for a satisfactory result to be obtained. Many of these cases died a few hours after admission.

Included amongst the 2,209 third class admissions were 304 sick convicts (*see* Table LXV) from the Cairo prisons. Of these, 1 was a case of smallpox, 1 measles, 133 typhoid fever, 31 typhus fever, 1 relapsing fever, 8 cerebro-spinal fever, 5 diphtheria, 7 mumps, 10 erysipelas, 14 cases under observation in which no symptoms of disease subsequently

TABLE LXV.—GOVERNMENT FEVER HOSPITAL. MONTHLY CONVICT ADMISSIONS AND DISEASES FOR WHICH ADMITTED.

MONTH.	Smallpox.	Measles.	Typhoid Fever.	Typhus Fever.	Relapsing Fever.	Cerebro-spinal Fever.	Diphtheria.	Mumps.	Erysipelas.	Other Diseases.	Observation Cases.	TOTALS.
January ... ..	—	—	—	—	—	1	1	2	1	3	—	8
February ... ..	—	—	2	—	1	2	—	1	2	4	—	12
March ... ..	1	—	90	29	—	—	1	—	—	26	4	151
April ... ..	—	—	11	1	—	—	—	—	1	8	2	23
May ... ..	—	—	6	—	—	1	—	—	1	4	—	12
June ... ..	—	—	3	—	—	2	—	1	1	10	2	19
July ... ..	—	1	2	—	—	2	1	1	4	7	3	21
August ... ..	—	—	6	—	—	—	—	—	—	3	1	10
September ... ..	—	—	2	—	—	—	—	—	—	3	—	5
October ... ..	—	—	4	—	—	—	—	—	—	10	2	16
November ... ..	—	—	3	1	—	—	1	1	—	12	—	18
December ... ..	—	—	4	—	—	—	1	1	—	3	—	9
TOTALS ... ..	1	1	133	31	1	8	5	7	10	93	14	304

developed, and 93 cases of non-admissible diseases sent in as suspected cases or under a mistaken diagnosis. The 93 wrongly-diagnosed cases included such varied diseases as malaria, influenza, three-days' fever, seven-days' fever, puerperal fever, pneumonia, bronchitis, tonsillitis, septic wounds, skin disease, etc. Of the convict patients, 26 died (Table LXVI) death being due to typhoid fever in 6 cases, typhus fever in 8, cerebro-spinal fever in 4, erysipelas in 3, and non-infectious disease in 5 cases (2 septicæmia, 1 acute mania, 1 empyæma, and 1 pneumonia) admitted as suspected of infectious disease. The convict case-mortality was therefore 8·5 per cent on the total number of convicts admitted in 1914.

In the hospital laboratory, 4,826 examinations of specimens were carried out during the year. These include 813 films for malaria, 813 for relapsing fever, 743 Widal's reaction for typhoid, 743 for paratyphoid, 743 for Malta fever, 64 typhoid blood cultures, 613 cultures from stools and urine for typhoid and paratyphoid, 46 specimens of sputa for tubercle bacilli, 184 swabs for diphtheria, 58 specimens of fluid for cerebro-spinal fever, 4 blood specimens for plague, and two stools for cholera. Bacteriological examinations of the stools and urine in cases of typhoid and paratyphoid and of throat swabs in cases of diphtheria were carried out at the terminations of these illnesses and the patients retained until negative results were obtained.

TABLE LXVI.—GOVERNMENT FEVER HOSPITAL. MONTHLY CONVICT MORTALITY AND CAUSES OF DEATH.

MONTH.	Erysipelas.	Typhoid Fever.	Typhus Fever.	Cerebro-spinal Fever.	Other Diseases.	TOTALS.
January ... ..	—	—	—	1	—	1
February ... ..	1	—	—	—	3	4
March ... ..	—	3	7	—	1	11
April ... ..	—	—	1	—	—	1
May ... ..	—	1	—	—	—	1
June ... ..	1	1	—	1	1	4
July ... ..	1	—	—	2	—	3
August... ..	—	—	—	—	—	—
September ... ..	—	1	—	—	—	1
October ... ..	—	—	—	—	—	—
November ... ..	—	—	—	—	—	—
December ... ..	—	—	—	—	—	—
TOTALS ... ..	3	6	8	4	5	26

In the report for last year, it was pointed out that the increasing advantage taken of the hospital by first and second class patients made it appear that in the future the original scheme of six pavilions would be required to cope with the increasing applications for admissions by these classes. This is more than borne out by the results of this year in which the increased admissions resulting from the application of additional measures of control have at times seriously strained the resources of the hospital as regards all classes of patients.

(f) AMBULANCE SERVICE.

The ambulance provision as regards material and personnel remains the same as last year, though the increasing calls on this Service resulting from a more extensive control of infectious disease is beginning to make itself felt. Not only does the Service, with its limited provision, undertake the removal of infectious cases to the Fever Hospital or elsewhere on the request of the Inspectorate, but it provides also for the free transport of non-infectious sick when this is required, and has, moreover, to arrange for the conveyance of dog-bitten persons from Qasr el 'Aini to the Antirabic Institute. The question therefore of an extension of the ambulance provision is likely to require consideration sometime in the immediate future. There were 2,786 calls on the Service during the year, 192 journeys being made by the first class, 502 by the second class, and 760 by the third class ambulances, whilst 1,332 journeys were made by the hooded carts.

(g) DEATH INQUIRIES.

Of the total of 26,128 deaths which occurred in Cairo during 1914, only 6,825 were certified by medical practitioners who had been in attendance during the last illness of the deceased. The remaining 19,303 deaths were deaths of persons who had received no medical attendance during life and whose deaths were consequently uncertified. The uncertified deaths in 1914 constituted therefore 73·8 per cent of the total deaths of the City, as compared with a percentage of 76·2 in 1913.

In the case of all these uncertified deaths, post-mortem inquiries into the causes thereof had to be carried out by the District Medical Officers or their delegates.



Of the 19,303 inquiries held, 5,402 concerned the deaths of females over the age of five years, the investigations in all these cases being therefore carried out by the district *hakimas* with the exception of eighty female deaths in outlying villages where the examinations were made by the village *dayas*. A daily average therefore of 14·5 female deaths were investigated in 1914 by the fourteen district *hakimas*, as compared with a daily average of 9·9 inquiries carried out by them in 1913. The remaining 13,901 deaths being deaths of males or of female children under the age of five years, the investigations were carried out by the District Medical Officers, with the exception of 1,145 cases in which the deaths having occurred in outlying villages the investigations were carried out by the village sanitary barbers. A daily average, therefore, of 34·9 death inquiries were held by the fifteen District Medical Officers in 1914 as compared with a daily average of 42·4 inquiries held by them in 1913.

The inquiries as a whole in 1914 averaged 52·9 per day, as compared with 55·2 per day in 1913.

Of the inquiries carried out by the District Medical Officers, 2,112 were in Bulâq I, 529 in Bulâq II, 1,275 in Sayeda Zenab, 1,760 in Khalîfa, 1,138 in Gamalîa, 995 in Darb el Ahmar, 1,231 in Bab el Sha'ria, 782 in Shubra, 742 in Abdîn, 837 in Abbassia, 605 in Old Cairo, 237 in Ezbekia, 183 in Musky, 182 in Zeitûn, and 148 in Helwân. Of the inquiries carried out by the *hakimas* 401 were in Bulâq I, 664 in Bulâq II, 813 in Sayeda Zenab, 323 in Khalîfa, 558 in Gamalîa, 630 in Darb el Ahmar, 415 in Bab el Sha'ria, 395 in Shubra, 277 in Abdîn, 104 in Abbassia, 340 in Old Cairo, 192 in Ezbekia, 149 in Musky, 36 in Zeitûn, and 25 in Helwân.

In the outlying villages appertaining to Shubra, Old Cairo, and Zeitûn, 1,225 inquiries were carried out by the sanitary barbers or *dayas* of the village concerned. In Table LXVII is shown the percentage of deaths uncertified in each district. The highest

TABLE LXVII.—RATIOS OF UNCERTIFIED TO TOTAL DEATHS IN CAIRO AND ITS DISTRICTS.

DISTRICT.	Total Deaths.	Uncertified Deaths.	Percentage of Uncertified Deaths.
Musky ... ..	619	332	53·6
Bab el Sha'ria ... ..	2,228	1,646	73·8
Ezbekia ... ..	1,246	429	34·4
'Abdîn ... ..	1,736	1,019	58·6
Sayeda Zenab ... ..	2,635	2,088	79·2
Helwân ... ..	234	173	73·9
Khalifa ... ..	2,378	2,083	87·5
Darb el Ahmar ... ..	2,302	1,625	70·5
Gamalîa ... ..	2,286	1,696	74·1
Shubra ... ..	2,755	2,002	72·6
Bulâq ... ..	4,154	3,706	89·2
Old Cairo ... ..	1,395	1,062	76·1
Waily ... ..	2,160	1,442	66·7
TOTALS ... ..	26,128	19,303	73·8

proportion of uncertified deaths occurred in Bulâq with 89·2 per cent of persons dying without any medical attendance during life. The lowest was in Ezbekia with 34·4 per cent of uncertified deaths.

(h) MEDICO-LEGAL AND POLICE.

During the year, 13,915 medico-legal examinations were carried out by the District and Police Medical Officers. Of these, 616 were medical examinations of injured persons whose wounds were of too trivial a nature to require any treatment, 11,855 were examinations

of persons for slight injuries requiring less than twenty days' treatment, 435 were examinations of more serious cases in which periods of treatment for longer than twenty days were required, 386 were post-mortem examinations of the dead bodies of persons dying in the streets, or whose death had been surrounded by circumstances of a suspicious nature, or who had been the victims of accidental or other violence, and 623 were re-examinations of injured persons sent for the second time on account of permanent deformities resulting from their injuries.

There were 132 examinations of lunatics.

1,180 *ghafîrs* and policemen were examined as to their fitness on entering the service. Of these, 791 were *ghafîrs* examined on the request of the Commandant's office, 50 were police examined on the request of the Personnel Office of the Ministry of the Interior, and 339 were police examined on requests emanating from the office of the Commandant of Police. On account of sickness, 2,629 police, *ghafîrs*, and employees of the Governorate and Commandant's office were dealt with during the year. Of these, 528 were *ghafîrs*, police, and employees of the Governorate and Commandant's office examined for sick leaves, 665 were *ghafîrs* coming up for examination on account of disorders of health, 417 were Non-Commissioned Officers and men of the Police and Ghafir Forces attending for treatment at the out-patient clinique, 611 were Non-Commissioned Officers and men treated in the Police Infirmary, 253 were Non-Commissioned Officers and men examined and sent to Qasr el 'Aini Hospital for treatment, and 155 were Non-Commissioned Officers and men found on examination to be suffering from or suspected of infectious disease and sent to the Fever Hospital.

Twenty-six Non-Commissioned Officers and men of the Police Force were vaccinated during the year and 9 were kept under special observation on account of previous exposure to malarial infection.

On the application of the Traffic Office of the Police 1,964 cab-drivers, carters, and motor-drivers were examined as to their visual capacity.

Estimations of age were carried out at the request of the Governorate or Police in the case of 1,346 persons.

102 shoeblacks were examined at the request of the Police.

260 sick civilians were examined for various reasons, 154 of these being sent to Qasr el 'Aini Hospital and 106 to the Government Fever Hospital.

In addition to those already mentioned, a further 137 persons were examined, for various reasons, on the request of the Parquet, Police, and Ministry of Finance.

#### (i) PROSECUTIONS.

Of the prosecutions instituted in 1913, 289 still remained undecided at the beginning of the present year. As regards these, the prosecution was successful in 260 cases; in 14 the individual proceeded against was never brought to trial, the papers having been filed on account of insufficient or unsatisfactory evidence; and in 15 there was failure to obtain a conviction.

During the present year, legal actions were instituted against individuals for various public health offences in 2,115 cases. Convictions were obtained in 1,502 of these cases, in 43 the trials resulted in acquittal, in 132 the papers were filed on account of insufficient evidence or as a result of compliance with the regulations after institution of proceedings, and in 438 the proceedings were still under consideration at the end of the year.

Of the 2,115 prosecutions, 413 were for contraventions against the *vidange* regulations, 39 for the illegal practice of medicine or its branches, 248 for offences under the law regulating vaccination, 57 for failure to fence vacant lands, 14 for contraventions of the *Arrêté* of January 21, 1911, for the control of passengers from cholera-infected countries, 178 for failure to notify infectious disease or other offences against the infectious disease



law, 46 for contraventions of the pharmacies and sale of poisons decree, 5 for offences against the assistant pharmacist law, 5 for transgression of the regulations for the control of returning pilgrims, 43 for non-observance of the births and deaths decree, 369 for infringements of the law and regulation for the control of objectionable, unhealthy and dangerous establishments, 210 general sanitary contraventions against the native and mixed penal codes, and 488 for adulteration of milk under Article 302 of the Penal Code.

Compared with the 1,401 prosecutions instituted in 1913, the number of prosecutions in 1914 has increased by fifty per cent. This increase is chiefly to be attributed to the larger number of cases in which action has been taken, in 1914, for offences against the *vidange* regulations and infectious disease law, to an increase in the number of general sanitary contraventions against the native and mixed penal codes, and to special prosecutions for the sale of adulterated milk. Of these causes of increase, the most important, as well from the number of cases dealt with as from the effect the experience gained from them may have on future legislation, is undoubtedly the last, which may be taken, in reality, as representing an entirely new venture.

It is true that prosecutions for the sale of adulterated milk have always been carried out in the past whenever sufficient evidence could be obtained, but, owing to the many difficulties surrounding this question, activities hitherto have been greatly hampered by the frequent difficulty of obtaining sufficiently clear cases on which to base legal proceedings. Samples of undoubtedly adulterated milk submitted for analysis by customers of milk vendors furnished unsatisfactory grounds for legal action, since the absence of any official *procès-verbal* of the purchase rendered it impossible to prove that adulteration had preceded the sale or that the sample of milk submitted for analysis corresponded to that sold. On the other hand it was far from easy for the officials of the Department to obtain with sufficient frequency samples of milk which had been actually adulterated since the formalities of purchase necessary for a successful prosecution served as a warning to the vendor of the purpose for which the purchase was intended.

At the end of August of this year, the promulgation of a law decreeing the establishment of maximum tariffs for foodstuffs and articles of prime necessity gave an unlooked for opportunity for more effectually dealing with vendors of adulterated milk. In terms of Article 4 of the law in question (Law No. 6 of 1914) it became an offence to refuse to sell at the tariff fixed, and vendors of milk had therefore either to supply the sample required, on the legal price being tendered, or render themselves liable to prosecution under this article.

The law came into operation on August 25, and four days later arrangements for the systematic taking of samples were put in force. From that date to the end of the year 990 samples of milk were taken for analysis. Of these, 493 satisfied the standard, 18 were doubtful, and 475 gave evidence of having been tampered with, 294 having been skimmed, 99 watered, 80 skimmed and watered, and 2 skimmed and probably watered. Legal action was taken against the vendors of the 475 improper samples which, with 13 other cases initiated by the District Medical Officers, brought the number of milk prosecutions in the last four months of the year up to 488. Convictions were obtained in 244 cases, 8 resulted in acquittal, in 38 cases for various reasons the papers were filed, and 198 cases were still awaiting decision at the end of the year. In the cases in which convictions were obtained the penalties inflicted varied from fines of P.T. 20 up to P.T. 300 with in several cases imprisonment up to one month or flogging up to five lashes. The result has been an appreciable improvement in the quality of the milk sold, the monthly percentages of adulterated samples being 52·7 per cent of those taken in September, 47·4 per cent in October, 43·3 per cent in November, and 46·9 per cent in December. As these percentages show, however, conditions in the milk trade are still far from satisfactory, though it is to be expected that a continuation of systematic prosecutions







*Class II.*

Grocery stores ... ..	832
Oil shops ... ..	31
Bakeries ... ..	44
Milk shops ... ..	41
Rice, sugar, candle, and soap warehouses ... ..	6
Butter shops ... ..	7
Boiled lupin shop ... ..	1
Cake manufactory ... ..	1
Pea-roasting establishments ... ..	2
Public kitchens ... ..	79
Sweet factories and confectioners shops ... ..	15
Distilling shops ... ..	5
Flour warehouses ... ..	92
Dye-shops ... ..	18
Vegetable-curing establishments ... ..	2
Brew-house ( <i>buza</i> ) ... ..	1
Oil-presses ... ..	3
Blacksmiths' shops ... ..	47
Tinsmiths' shops ... ..	52
Metal-plating establishments ... ..	14
Copper-smithies ... ..	2
Copper-turning establishments ... ..	7
Marble workshops ... ..	3
Lime kiln ... ..	1
Plaster mills (gypsum) ... ..	4
Cement pavement factories ... ..	5
Silk-beater's shop ... ..	1
Wooden sheds for other than private use ... ..	2
Hide warehouses ... ..	2
Cattle sheds ... ..	3
Public stables ... ..	55
<hr/>	
Total of second class establishments licensed in 1914 ... ..	1,378
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*Class III.*

Frying and roasting establishments ... ..	44
<i>Ta'mia</i> and fried fish shops ... ..	292
Butchers' shops ... ..	182
Poulterers' shops ... ..	14
Fishmongers' shops ... ..	7
Pastry shops ... ..	16
Salted fish shops ... ..	13
Ironing shops ... ..	203
Seed-husking establishments ... ..	2
Cement and gypsum stores ... ..	15
<hr/>	
Total of third class establishments licensed in 1914 ... ..	788
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In the report for 1911 it was indicated that the initial examination and laying down of conditions for the exploitation of establishments requiring public health control did not go far enough, and that subsequent regular and systematic inspections were necessary if such establishments were to be kept up to the standards laid down. The provision of a small special staff for this purpose permitted of a start being made in this direction during the course of the present year. With the object of providing frequent regular and systematic inspections it was considered preferable to confine the activities of the new staff to the control of such establishments as were of greatest importance from a general public health point of view rather than to spread their efforts over the whole range of licensed establishments and thus impair the efficiency of control by diminished frequency of inspection.

TABLE LXVIII.—OBJECTIONABLE, UNHEALTHY, AND DANGEROUS ESTABLISHMENTS. PREVIOUSLY EXISTING ESTABLISHMENTS INSPECTED IN 1914.

NATURE OF ESTABLISHMENT.	MARCH.		APRIL.		MAY.		JUNE.		JULY.		AUGUST.		SEPTEMBER.		OCTOBER.		NOVEMBER.		DECEMBER.		TOTALS.	
	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.	Conditions Satisfactory.	Conditions Faulty.
Grocers' shops ... ..	426	46	389	41	263	55	308	50	281	57	306	37	28	—	343	35	295	63	402	76	3,041	460
Butchers' shops...	180	27	63	10	59	19	86	12	47	1	33	4	2	—	68	6	54	8	132	13	724	100
Bakeries ... ..	13	1	15	2	23	11	25	11	16	16	16	15	—	—	23	13	23	20	12	14	166	103
Restaurants with public kitchen ...	194	22	110	21	127	25	118	28	88	30	77	12	15	1	165	28	93	37	151	45	1,138	249
Confectionery establishments ... ..	56	10	23	6	109	10	51	8	22	—	11	1	—	—	18	2	23	9	13	8	326	54
Oilmen's shops ... ..	70	16	48	5	42	13	55	9	49	13	45	10	15	16	100	14	61	13	59	11	544	120
Poulterers' shops ... ..	9	6	10	2	7	7	10	—	2	1	8	2	—	—	6	1	4	—	14	11	70	30
Dairies and milk shops ... ..	25	5	13	9	21	11	39	8	12	3	10	4	—	—	23	5	12	2	17	9	172	56
Vegetable dealers' shops ... ..	11	—	—	—	2	—	4	—	1	—	1	—	—	—	5	—	4	—	14	—	42	—
Fish shops ... ..	20	10	16	—	16	3	12	7	12	5	8	5	—	—	13	7	25	12	29	8	151	57
Other establishments ... ..	19	6	89	10	52	17	87	21	64	28	146	42	104	16	284	59	131	64	128	68	1,104	331
TOTALS ... ..	1,023	149	776	106	721	171	795	154	594	154	661	132	164	33	1,048	170	725	228	971	263	7,478	1,560



On these grounds, therefore, the activities of the new staff have been limited for the present to the assumption of a systematic superintendence only over those licensed establishments which deal with foodstuffs and drinks, and 9,038 such establishments have been dealt with since the Service was instituted in March of the present year. In 7,478 of the establishments inspected, the conditions were found to be satisfactory and to call for no special action. In 1,560 cases faulty conditions were discovered and the proprietors compelled to carry out the improvements required. The details of the various inspections will be found in Table LXVIII.

(l) PASSENGER AND PILGRIM SERVICE.

*Passengers.*—During 1914 there arrived in Cairo 17,000 passengers coming from countries infected with cholera or for other reasons requiring to undergo a period of observation after their arrival. The number of arrivals in 1914 corresponds closely with that in 1913, there having been in the latter year a total of 17,982 passengers. Of the arrivals in 1914 (Tables LXIX and LXX), 8,499 arrived by way of Alexandria, as compared with 8,636 in 1913; 7,664 were landed at Port Said, as compared with 8,755 in 1913; whilst 837 disembarked at Suez, as against 591 in 1913. Of the total arrivals in Egypt with a Cairo destination, 15,104, or 88·8 per cent, underwent their full period of observation, as compared with a percentage of 89·4 in 1913; 784, or 4·6 per cent, left for other destinations before their full period of observation had been completed, as compared with 3·8 per cent in 1913; and 1,112, or 6·5 per cent, could not be traced, as against a percentage of 6·8 untraced passengers in 1913.

Of those with Alexandria as the port of disembarkation, 7,858, or 92·4 per cent, were traced and observed, as against 92·9 per cent in 1913; 246, or 2·9 per cent, were traced but left before the completion of their period of observation, as against 2·4 per cent in 1913; and 395, or 4·6 per cent, remained unfound, as compared with 4·7 per cent in 1913.

Of the passengers landing at Port Said, 6,612, or 86·2 per cent, were traced and observed, as against 87·9 per cent in 1913; 463, or 6·0 per cent, were traced but only partially observed, as compared with 4·1 per cent in 1913; and 589, or 7·7 per cent, were never found, as compared with 8·0 per cent in 1913.

Of the Suez passengers, 634, or 75·7 per cent, were traced and fully observed, as against 62·8 per cent in 1913; 75, or 8·9 per cent, were traced but not fully observed, as compared with 16·9 per cent in 1913; and 128, or 15·3 per cent, were undiscovered, as against 20·3 per cent in 1913.

Of the partially observed passengers leaving Cairo before the full period of their observation had been completed, the great majority were traced in their new destinations and there underwent their remaining periods of observation. A small proportion left the country after only a few days' residence, and in consequence ceased to be of public health interest as far as Egypt was concerned.

Of the passengers travelling *viâ* Alexandria, 4,090, or 48·1 per cent, came from Constantinople, as compared with 65·5 per cent in 1913; 735, or 8·6 per cent, came from Salonica, as compared with 3·25 per cent in 1913; 388, or 4·6 per cent, arrived from Smyrna, as compared with 11·5 per cent in 1913; 3,156, or 37·1 per cent, from Syrian ports, against 19·75 per cent in 1913; and 130, or 1·5 per cent, from various places of origin, 7 being from Russian Transcaucasia, 13 from Greece, and 110 from Bulgaria.

Of passengers disembarking at Port Said, there were only 7 from Constantinople, as compared with 817 in 1913, whilst there were no arrivals from Smyrna as compared with 1,244 in the previous year. Four passengers arrived from Hodeida (Arabia). The remaining 7,653, forming 99·8 per cent of the total, came from Syria, as compared with 76·45 per cent in 1913. Of passengers landing at Suez, 35, or 4·2 per cent, came from



TABLE LXIX.—COMPARATIVE NUMBER OF PASSENGERS ARRIVING IN 1913 AND 1914.

MONTH.	ALEXANDRIA.		PORT SAID.		SUEZ.		TOTALS.	
	1913.	1914.	1913.	1914.	1913.	1914.	1913.	1914.
January ... ..	391	642	571	523	35	118	997	1,283
February ... ..	494	679	444	506	60	128	998	1,312
March... ..	817	1,524	510	537	89	85	1,416	2,146
April ... ..	668	902	660	1,231	80	74	1,178	2,208
May ... ..	460	571	592	619	54	231	1,106	1,421
June ... ..	294	435	589	589	70	57	952	1,081
July ... ..	462	892	696	1,014	49	49	1,207	1,955
August ... ..	429	822	500	795	1	28	930	1,645
September... ..	1,064	893	1,474	1,036	18	23	2,556	1,952
October ... ..	1,444	567	1,182	619	31	32	2,657	1,218
November ... ..	1,119	386	959	156	27	9	2,105	551
December ... ..	994	186	578	39	77	3	1,649	228
TOTALS ... ..	8,636	8,499	8,755	7,664	591	837	17,982	17,000

Aden, as compared with 23·35 per cent in 1913; 153, or 18·3 per cent, from Tor, as against 20·4 per cent in 1913; 120, or 14·3 per cent, from Indian ports, as compared with 28·1 per cent in 1913; 129, or 15·4 per cent, from Jeddah, as compared with 20·6 per cent in 1913; and 400, or 47·8 per cent, of varied provenance, there being 155 from various Red Sea ports, 153 passengers by sea from various ports of Egypt and the Sudan, 18 of Roumanian provenance, 3 from Odessa, 48 from Busra, 11 from various Asiatic ports, 10 from Syria, and two from St. John's.

Of the aggregate observed arrivals with a Cairo destination at all the ports, 10,819, or 63·6 per cent, came from Syria, as compared with 46·6 per cent in 1913; 4,097, or 24·1 per cent, were from Turkey in Europe, as against 37·6 per cent in 1913; 388, or 2·2 per cent, came from Asia Minor, as compared with 12·4 per cent in 1913; 524, or 3·1 per cent, from Arabia and the Persian Gulf; 748, or 4·4 per cent, were from Greece; 138, or 0·8 per cent, from other European countries, 110 being passengers from Bulgaria, 18 from Roumania, and 10 from Russia. Of the remaining 286 passengers, forming 1·7 per cent of the total, 153 were passengers by sea from one port to another in Egypt and the Sudan, 120 came from India, 11 from various other places in Asia, and 2 from St. John's. In the figures given no cognizance is taken of any arrival of troops.

In comparing the figures for 1914 with those of 1913, it is to be borne in mind that we are dealing with only a variable fraction of the total passenger arrivals in Egypt, the figures given being concerned merely with the arrivals in Cairo of passengers coming from certain countries in which for the time being conditions may be such as to render their observation advisable. The bulk of the figures, however, are provided by the same countries in both years and it might have been expected that the influence of the European war would have resulted in a much greater reduction in the number of passengers requiring observation than has actually occurred. The 1914 total of 17,000 passengers shows a reduction of only 5·4 per cent as compared with the figures for 1913, and it is interesting to note the manner in which the 1914 total has been attained. In both years the majority of the passengers under observation have arrived from Turkish territory, there having been 15,640 passengers with this provenance in 1914 as compared with 17,244 in 1913. Now, in view of the circumstances it was to be expected that the number of passengers from the Turkish dominions was likely to be considerably restricted through the European war, and this is what has actually occurred, there having been only 4,927 arrivals from Turkish territory since the beginning of August as against 9,504 for the corresponding period of the



TABLE LXX.—NEW ARRIVALS FROM FOREIGN COUNTRIES UNDER OBSERVATION IN 1914.

MONTH.	Via ALEXANDRIA.										Via PORT SAID.					Via SUEZ.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
	PORT OF ORIGIN.										Number of Passengers.	PORT OF ORIGIN.				Observed.	Untreated.	Departed before Full Period of Observation Completed.	PORT OF ORIGIN.															Observed.	Untreated.	Departed before Full Period of Observation Completed.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
	Constantinople.	Salonica.	Smyrna.	Tripoli (Syria).	Jaffa.	Other Syrian Ports.	Piræus.	Batumi.	Dedagatch.	Number of Passengers.		Constantinople.	Syrian Ports.	Hodeida.	Observed.				Untreated.	Departed before Full Period of Observation Completed.	St. John's.	Odessa.	Constanza.	Syrta.	Sudan.	El Arish.	Qantara.	Tor.	Hodeida.	Jambo.	Jedda.	Other Red Sea Ports.	Aden.				Basra.	Calcutta.	Bombay.	Other Asian Ports.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																								
January ...	495	6	28	—	—	113	—	—	—	595	35	12	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—	523	—



previous year. The greatest effect on Turkish traffic has naturally occurred since Turkey herself entered the arena of hostilities, there having been, since then till the end of the year, only 537 arrivals of Turkish provenance in Cairo as compared with 3,583 in the corresponding period of 1913. The first outbreak of the European war was immediately followed by a rush of returning Egyptians and other passengers who had been summering in Europe, and this rush considerably affected the figures of the August provenance in the direction of increase, there having been 1,482 August arrivals from Turkey, as compared with 881 in the previous August. The initial rush was followed by a period of comparative slackness, there being only 2,908 arrivals from Turkish territory during the months of September and October, as compared with 5,040 in the corresponding period of 1913. The total diminution of the Turkish passenger traffic from the onset of the European war till the end of the present year has therefore been, as regards Cairo, 4,577 passengers less than in the corresponding period of 1913. The total diminution for the whole year has been, however, only 1,604, so that the restriction of traffic since the war has been largely compensated by an increased activity in the period preceding the commencement of hostilities. This increase in 1914 in the months preceding the war is spread over the whole of this period, being 26·5 per cent in January, 21·3 per cent in February, 51·7 per cent in March, 59·1 per cent in April, 14·4 per cent in May, 11·2 per cent in June, and 66·3 per cent in July, as compared with the totals of the corresponding months in 1913.

As regards the passenger traffic to Cairo from places outside the Turkish dominions, the proportion of this which has been controlled for public health reasons has been so small as scarcely to call for detailed comparison, the total for 1914 being 1,360 passengers as against 738 in the previous year.

*Pilgrims.*—Owing to the effects of the European war, few Egyptians undertook the pilgrimage in 1914. During the year there were only 308 passports for the Hedjaz issued to persons resident in Cairo, and of these, two were issued to Indians and seven to visitors from the Hedjaz anxious to return there.

Only one special train was run from Suez in 1914 for the conveyance of returning pilgrims, as against 17 pilgrim trains in 1913. This train arrived in Cairo on December 10 with 335 pilgrims for Cairo and Upper Egypt as compared with 4,643 pilgrims arriving by special trains in 1913. Of this number 47 were for Cairo and 288 were for various destinations in Upper Egypt, there being 7 for Gîza, 71 Fayûm, 5 Beni Suef, 19 Assiût, 11 Girga, 167 Qena, and 8 Aswân. With the exception of the aforementioned 47 Cairo pilgrims arriving by the official train who were dealt with under the usual pilgrim arrangements, all other arrivals from the Hedjaz were dealt with under the ordinary arrangements of passenger observation and are included in the totals of passengers arriving from Tor, Jeddah, and other Red Sea ports.

#### (m) ANTI-MOSQUITO MEASURES.

During the year there was evidence of a slightly increasing desire on the part of the public for the application of anti-mosquito measures, many requests being received from individuals for the initiation of such in their houses. As pointed out, however, in last year's report, any extension of anti-mosquito work is at present necessarily limited by the amount of the prophylactic fund which can be spared for this purpose, the cost of these measures being defrayed from this fund. This restriction, however, under existing conditions, is of relatively little importance, since the optional acceptance of the application of measures renders it comparatively useless to attempt to deal with the question except in a very few districts where a majority of the inhabitants has been found willing to permit of the necessary arrangements being made. Even here, however, the results are unsatisfactory, since the presence in such districts of a few untreated houses does not permit of



the efficient removal of mosquitoes from the district and is the cause of numerous complaints from residents in the neighbourhood of such houses. It should be understood, therefore, that, in the absence of regulations making it a punishable offence for any person to fail to take all reasonable precautions for the prevention of the breeding of mosquitoes in any cess-pit, pool, or other collection of water under his control, no more than a moderate measure of success is to be expected even in districts where the voluntary acquiescence of the majority of the inhabitants permits of a fairly extensive application of measures.

Almost all the fresh applications received during the year were from occupiers of individual houses in districts where no general measures could be applied and had therefore to be refused.

(n) LAWS.

During the course of the year, the most important new local public health law promulgated was the *Arrêté* of the Governor of Cairo dated May 28, 1914, extending the dispositions of Article 3 of the Ministerial *Arrêté* of June 7, regarding street cleanliness to Sharia Clot Bey, Midân el Khazindar, Sharia el Bawâky, Sharia el Gawhâry, Midân 'Ataba el Khadra, Sharia Mohammad Ali, the quarter limited to the south by the Sharia Kubry Qasr el Nil, to the west by the Nile and Old Ismailîa Canal, and to the east by Sharia Nubâr Pasha, Sharia Kamel, Place de l'Opera, and Sharia 'Abdîn, and the quarter limited to the south by the Ezbekîa Gardens, to the west by Sharia Kamel, and to the north-east by Sharia Wagh el Birka.

A new Ministerial *Arrêté* dated June 14, 1914, lays down conditions for the control of returning pilgrims arriving from Tor, and a new law dated July 11 (Law No. 5) deals with the filling up and draining of ponds and marshes.

An *arrêté* of the Ministry of the Interior dated August 29, 1914, for the control of itinerant paper sellers is of public health interest as providing a means of control over such persons should any danger of the transmission of infectious disease by them in the course of their occupation arise.

Law No. 6, of August 20, providing for the determination of maximum tariffs for food-stuffs and articles of prime necessity, though not primarily intended as a public health measure, has already been referred to as permitting of a more efficient control over the sale of falsified milk.

(o) VACCINATIONS.

During 1914, 89,449 vaccinations were carried out by the Medical Officers of the inspectorates and districts, as compared with 35,117 in 1913.

Of these 89,449 vaccinations, 28,349 were primary vaccinations of children under the vaccination decree, 28,082 of these being vaccinations of native children, as compared with 28,968 in 1913, and 267 of children of foreign parentage, as compared with 263 in the previous year.

The remaining 61,100 vaccinations in 1914 were either secondary vaccinations of actual smallpox contacts under the infectious disease law or of persons voluntarily submitting themselves to secondary vaccination. The number of secondary vaccinations in 1913 was only 5,886, the great increase in the present year being due to the outbreak of smallpox in the earlier part of the year.

Of the 61,100 secondary vaccinations in 1914, 27,877 were carried out by the district Medical Officers, 26,678 of these being vaccinations of natives and 1,199 of foreigners. The remaining 33,223 secondary vaccinations in 1914 were carried out by the Medical Officers of the inspectorate, and took place principally during the first half of the year and were coincident with the outbreak of smallpox which occurred then. Only the gross figures of these were therefore noted, there being no time during this period to keep separate records of natives and foreign vaccinations for purposes of comparison.

(p) MISCELLANEOUS.

There were issued during the year 161 permits for the transport of dead bodies. Of these, 4 were bodies embalmed and removed abroad, 1 arrived from abroad for burial in Egypt, 90 were transported from Cairo to other localities in Egypt, 24 were brought for burial to Cairo from other parts of the country, 18 were transferred from one cemetery to another in Cairo and 24 were removed from one grave for burial in another part of the same cemetery.

There were 313 complaints regarding matters of public health, received from the outside public in 1914, as compared with 1,115 in 1913. Of these, 296 were justified and the matter was dealt with. In the remaining 17 cases, beyond inquiry no action was taken, the complaint having proved to be either unfounded or of a nature regarding which there were no powers to act.

Action was taken in the interests of public health in 109 cases for the fencing of waste lands.

*Vidange* notices were served on the proprietors of 7,178 houses for the clearance of their cess-pits. The notices were complied with in 6,765 cases without further action. In 413 cases legal proceedings had to be instituted.

On behalf of the Medical Commission or at the request of various Government Departments 469 sick Government employees were dealt with by the district Medical Officers.

One hundred and seventy-one mosques were examined as to their sanitary conditions, recommendations being made in the case of 144 of these.



## 2.—REPORT ON THE SCAVENGING AND WATERING SERVICE, CAIRO CITY.

In January 1914 the Service operated over a total area in the city and suburbs of 2,950,000 square metres of public roads, macadam, asphalt, and earth.

During the year the following additional macadam areas were handed over: 145,554 square metres.

Thus in December 1914 the total area amounted to 3,095,554 square metres.

*Work against Payment for Private Account.*—There has been an increase of this by 11,928 square metres in 1914, and the total area under this head is now 73,475 square metres.

*Buildings.*—Owing to reductions in credits effected in 1914, no new stabling were undertaken, though this had been contemplated.

A sum of L.E. 582, granted for building a forage store at Abbassîa, was also dispensed with for economy's sake.

*Water Consumption.*—The following is a tabular statement of consumption in 1913 and 1914; increase has been on the whole normal:—

TABLE LXXI.

MONTH.							1913.	1914.
							Cubic Metres.	Cubic Metres.
January	...	...	...	...	...	...	22,759	31,830
February	...	...	...	...	...	...	32,096	29,521
March	...	...	...	...	...	...	44,034	51,814
April	...	...	...	...	...	...	54,993	61,933
May	...	...	...	...	...	...	73,697	84,332
June	...	...	...	...	...	...	73,061	90,645
July	...	...	...	...	...	...	74,106	92,367
August	...	...	...	...	...	...	71,057	74,799
September	...	...	...	...	...	...	65,335	69,664
October	...	...	...	...	...	...	61,525	31,733
November	...	...	...	...	...	...	38,568	23,874
December	...	...	...	...	...	...	31,078	11,814
TOTAL							642,309	654,326

Exceptionally  
hot months.

Owing to reduced watering, consumption has greatly fallen since October 1914.

*Rolling Stock.*—Renewal of old and purchase of new material in 1914 amounted to L.E. 1,500.

All repairs were executed in the Service shop as usual.

The following new stock was bought:—

- 6 hand carts and trucks.
- 23 large dust bins.
- 13 double dust carts.
- 29 single dust carts.
- 2 single donkey dust carts.
- 2 double water carts.
- 4 single water carts.

Dust carts were as usual built at the Arsenal and harness made in the Model Workshops. Prices of most of these have again risen and are now as follows :—

	1913.		1914.	
	L.E.	M.	L.E.	M.
Single dust cart... ..	14	500	14	500
„ set of harness ... ..	3	800	4	200
Double set of harness ....	4	800	5	300
„ dust cart ... ..	58	000	60	000

*Bicycles.*—During 1914 two new ordinary bicycles were bought for the Service, six ordinary bicycles were condemned and replaced, leaving sixty in use at the end of the year.

Two bicycles were also supplied to Central Stores, six condemned and replaced, leaving forty-nine in use.

*Motor Cycle.*—In November 1913 a motor cycle was purchased for the use of the Service at the cost of L.E. 60.

Between January 1, 1914, and December 31, 1914, this machine has run 2,780 miles and has cost in upkeep L.E. 10.

*Animals.*—At the beginning of 1914, the strength was 508 mules, 18 horses, 20 donkeys, a total of 546. During the year 51 mules, 1 horse, and 3 donkeys were destroyed or sold as unfit, and 43 mules and 1 horse were bought. Thus, in December 1914, the strength was 500 mules, 18 horses, 17 donkeys, a total of 535.

Average price of mules was stationary, viz. L.E. 30.

*Forage.*—During the greater part of the year the forage ration scale remained unchanged, but in September 1914 it was reduced on the recommendation of the Veterinary Service, so that in December 1914 the rations were as follows :—

TABLE LXXII.

	Barley.	Bran.	Tbn.	Straw.
	Kilos.	Kilos.	Kilos.	Kilos.
Water cart and machine brush mule ... ..	5	0·500	3·750	2·500
Dust cart mule ... ..	4	0·500	3 750	2·500
Horse ... ..	4	0·500	3·750	2·500
Donkey ... ..	2	0·500	2·500	2·500



The following table of prices for 1914, as compared with 1913, shows a rise in *tibn* and straw :—

TABLE LXXIII.

					1913.		1914.	
					L.E.	M.	L.E.	M.
Barley	...	...	...	ton of 1,000 kilos.	8	586	8	200
Bran	...	...	...	"	5	910	5	910
<i>Tibn</i>	...	...	...	"	2	610	2	900
Straw	...	...	...	"	1	118	1	375
<i>Bersîm</i>	...	...	...	qantâr of 100 lbs.	0	034	0	033

*House-to-house Collection of Rubbish.*—The proposed extension of this Service has not yet been put into force.

*Rubbish Daily Output.*—The following are the names of the *dépotoirs* and the daily delivery to each :—

TABLE LXXIV.

									Single Dust Carts. 1 Cubic Metre Capacity.	Double Dust Carts. 2 Cubic Metres Capacity.
Madbah	...	...	...	...	...	...	...	...	50	90
Shanawâni	...	...	...	...	...	...	...	...	55	—
Gîza	...	...	...	...	...	...	...	...	35	20
Husseinîa	...	...	...	...	...	...	...	...	105	27
Shubra	...	...	...	...	...	...	...	...	24	3
Embâba	...	...	...	...	...	...	...	...	29	9
Matarîa	...	...	...	...	...	...	...	...	31	—
TOTAL ... ..									329	119

In addition, thirty tons weight of rubbish are daily burnt in the destructor and 165 single dust cart loads supplied daily to native baths. Therefore the total daily amount dealt with by the Service at the rate of one-third of a ton weight per cubic metre is 274 tons, a total for the year 1914 of  $274 \times 365 = 100,010$  tons.

Sites available for rubbish dumping are yearly getting more limited and the Service has to go further afield. In consequence transport has to be increased.

*Daily Paid Labour.*—There is abundance of this. In September 1914, owing to the reduction of credit, rates were considerably reduced.

*Municipal Supplies.*—The credit for 1914, viz. L.E. 3,000, has again proved insufficient; in the course of the year L.E. 1,000 additional was expended for this work, owing to the increase of establishments.

*Drainage Transport Service.*—This work, together with its staff and material, was taken over by the Service in April 1914. The normal staff daily employed was 21 mules and 19 single sewage carts. In rainy weather this staff is increased.

### 3.—REPORT ON PORT SAID TOWN.

The general health of Port Said has been satisfactory during the past year, and there has been no notable outbreak of disease. The prominent feature of the year's work has been the advancement of projects and improvements which are intimately concerned with the health of the town. Amongst these may be mentioned :—

- (1) The progress of main drainage.
- (2) Completion and inauguration of a children's free dispensary.
- (3) Progress of tabulation and detailed examination of all Etablissements Insalubres, with legal proceedings against or notification to proprietors of those places found insanitary.
- (4) Commencement of project to fill in with sand all cellars containing water and sewage.
- (5) Enlargement and rearrangement of cemetery.

*Population.*—The estimated population to July 1914, based on the census of 1907, will be found in the table on page 108.

*Births and Deaths.*—The figures will be found on pages 109 and 110. The death-rate amongst natives has been remarkably less than the average, showing a percentage decrease of 9 per cent. This decrease was particularly marked during the latter six months of the year, the period during which the children's dispensary was working.

*Infectious Diseases.*—Detailed figures will be found in the table on page 25.

*Plague.*—Fifty cases of bubonic plague, of which 6 were Europeans and 44 natives have occurred, as compared to 25 cases last year. Of these cases, 6 occurred at Om Rish, Qantara. As many as nine cases were found amongst the coast guards occupying the barracks between Old and New Manakh. Of these, 8 were Sudanese.

Rat-catching has been regularly carried on throughout the year. The town is divided for trapping purposes into six divisions, while concentrated trapping in lieu of disinfection has been carried out in the quarters in which plague cases occurred. 40,134 rats have been secured during the year.

*Water Supply.*—The quality of the filtered water supply is quite satisfactory. The filters, of the Puech-Chabal system, are managed by the Suez Canal Co. The same system is in use at Ismailia. Bacteriological examinations are made daily. The price of water for the poor people of the town is four ballasses (an earthenware jar) of fifteen litres each for five centimes (two milliemes) from the tap, and sold by water-carriers to houses at ten centimes (four milliemes). There are now no free standpipes in Port Said.

*Drainage.*—The progress of the main drainage was arrested at the commencement of the war, but arrangements have now been made to continue the work.

The amount of *vidange* work carried out in the town for six months from July to December (inclusive) was 25,741 cubic metres.

*Mosquito Campaign.*—This work comes under the Municipality, but is supervised by the Medical Officer of Health. A mixture of refined and crude petroleum is applied weekly to all collections of water or sewage, water receptacles are emptied, and stagnant surface-water dealt with as far as possible. The town is, as a rule, fairly free from mosquitoes, while anopheles are very rare.



*Etablissements Insalubres, Incommodes et Dangereux.*—A careful registration of establishments has been made, showing in each case the conditions actually entered on the permit and whether these conditions are fulfilled, while a note has been made of other alterations or conditions required which are not covered by the entries on the permit. All establishments in the European quarter, and also a large number in the native quarter, have been notified through the Police of what is required to be done. This notification has had a very marked effect : in the European quarter a great deal has been accomplished to improve the hygienic state of establishments such as restaurants, food shops, bakeries, aerated water factories, etc.; in the native quarter, however, up to the present, we have not had such good results.

The figures given below show the establishments found to be in an insanitary state on which conditions were imposed :—

First class : conditions completed 3 ; improved 4.

Second class : conditions completed 40 ; improved 24.

Third class : conditions completed 3 ; improved 2.

In the European quarter there were 15 contraventions against the decree, and in the native quarter 9.

*Sale of Milk.*—More stringent conditions have been imposed on milk shops. Special receptacles for storage must now be provided and all milk boiled.

Twelve samples of milk were examined, of which only 4 were found to be good. In the other 8 cases fines, and in one case imprisonment also were inflicted on the offenders.

*Markets.*—In the European quarter there is one small stationary market. An *arrêté* is in hand to impose requisite additional conditions. The remaining markets consist of hand carts in certain streets.

In the native quarter there is a market in an open area to the south of the town. Its position there is temporary pending the completion of arrangements to be made by the Municipality for its accommodation.

*Hawkers.*—This class obtain permits from the police and hire sites from the Municipality.

*Children's Dispensary.*—This institution was opened by the Municipality on June 15, 1914, for the treatment of the simple ailments of the children of the poor. An English matron is in charge and is assisted by one Italian and one native assistant. During the first period of six months there were 30,615 attendances, of which 6,275 were new patients. Of the new cases attending there were:—

Eye cases	...	...	...	...	...	...	1,817
Abdominal	...	...	...	...	...	...	2,250
Skin	...	...	...	...	...	...	744
Surgical	...	...	...	...	...	...	323
Various...	...	...	...	...	...	...	1,157

There was for last year a decrease in the infantile death-rate under five years of 9 per cent, and it is remarkable that the great decrease was during the last six months of the year. This large reduction is in great part no doubt due to the work done at the dispensary. It is an example of the good work which the children's dispensaries in Egypt are carrying out.

*Passenger Control.*—A detailed table will be found on pages 36 and 37.

## VII.—MEDICAL COMMISSIONS.

### 1.—CAIRO.

As will be seen from the attached table, 3,776 certificates were issued by the Central Medical Commission during 1914. This shows an increase of 763 as compared with 1913.

The number of certificates issued by the Central Medical Commission during the last five years is as follows :—

1910	...	...	...	...	...	...	...	2,521
1911	...	...	...	...	...	...	...	3,088
1912	...	...	...	...	...	...	...	2,961
1913	...	...	...	...	...	...	...	3,013
1914	...	...	...	...	...	...	...	3,776

The figure 3,776 does not, however, give the number of actual examinations made, as many of the applicants were examined twice or even three times in accordance with the system by which an applicant is allowed to improve his condition (physical and visual) by having an operation performed (for example for hernia, hydrocele, varicocele, etc.) or by consulting an oculist and obtaining suitable glasses.

The actual number of examinations was 4,184.

From the beginning of the year to the end of May the Commission met twice a week; there were forty-three sessions and the average number of examinations was forty-five for each session.

From June 1 to the end of the year, the Commission met five days a week, which gave 149 sessions, and the number of examinations made at each meeting averaged fifteen.

The work of the Central Medical Commission having of late years grown to such proportions it was found necessary to appoint a permanent president, and vice-president, the whole of whose time should be given to the work of the Commission.

These posts were created from April 1, 1914, and from June 1, 1914, the Commission sat daily, except Sundays and Government holidays, instead of only twice a week as heretofore.

At once the number of examinations at each session dropped, and instead of having from forty to sixty cases to examine as under the old regime, we now have from ten to twenty, so that each case can be thoroughly and carefully gone into.

The duties of both the Central and Provincial Medical Commissions have been extended, and new regulations have been issued for the guidance of the Provincial Medical Commissions, and the examination of candidates for *hors cadre* posts arranged for.

The question of providing new and more suitable accommodation for the Central Medical Commission has already been raised and plans drawn up.

### 2.—PROVINCIAL.

The 18 Provincial Medical Commissions made 4,307 medical examinations.

A statistical table is attached showing the details of these examinations.

The new regulations for these Commissions have already been approved and distributed by the Ministry of Finance.



TABLE LXXV.—STATISTICAL RETURN OF THE CENTRAL MEDICAL COMMISSION.

MINISTRIES AND ADMINISTRATIONS.	CANDIDATES FOR ADMISSION.							EMPLOYEES.										HEIRS.				TOTAL.	
	FIT.				UNFIT.			Standing Cases of Vision up to December 1914.	PENSIONS.						LEAVES.			Expert Opinion taken.	Able to Obtain Livelihood.	Unable to Obtain Livelihood.	Age.		Recommended for Pension for Some Time and Re-examination.
	At Examination by the Central Me- dical Commission.	Vide Certificates Approved.	Detailed Reports under Art. 12.		Vision.	Other Diseases.	Postponed.		Grand Mal.	Unable to Earn Livelihood.	Able to Earn Livelihood.	Found Fit for Duty.	Granted, <i>vide</i> Cer- tificate Approved.	Granted after Examination by Central Medical Commission.	Refused.	Sent to Hospital for Treatment, Observation, and Report.	Age.						
			Vision.	Other Diseases.																			
Ministry of the Interior ... ..	141	—	1	—	19	24	32	14	77	483	5	—	—	22	82	92	12	4	12	3	—	—	1,023
Department of Public Health ... ..	38	—	2	—	3	3	1	6	17	7	—	1	11	29	38	5	—	—	—	—	1	—	164
Prisons Department ... ..	10	—	—	—	—	2	2	—	22	23	—	—	—	2	4	8	1	—	—	1	—	—	75
Local Commissions ... ..	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	4
Municipalities ... ..	3	—	—	—	—	—	1	—	—	—	—	—	—	—	—	2	—	—	—	—	—	—	6
Ministry of Finance ... ..	112	—	—	—	6	6	24	18	39	11	3	13	—	8	75	48	6	1	28	6	1	3	439
Survey Department ... ..	21	—	1	—	1	—	—	2	11	2	—	3	—	5	26	93	7	—	1	—	—	—	173
Coast Guards Administration ... ..	6	—	—	—	4	—	1	—	5	37	—	—	—	—	6	8	—	—	4	2	—	—	73
Customs Administration ... ..	6	—	—	—	—	—	—	—	—	9	—	—	—	—	9	—	—	—	—	—	—	—	24
Ports and Lighthouses Department ... ..	—	—	—	—	—	—	—	—	2	12	—	—	—	—	2	—	—	—	—	—	—	—	16
Postal Administration ... ..	23	—	—	—	—	4	7	3	2	15	—	2	2	6	11	2	2	—	—	1	—	—	80
Government Press ... ..	—	—	—	—	—	—	—	1	3	1	—	3	—	—	1	2	—	—	—	—	—	—	11
Statistical Department ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1
State Domains ... ..	39	—	—	—	16	5	8	1	4	—	—	—	—	1	18	19	1	—	2	—	—	—	114
Archives... ..	—	—	—	—	—	—	—	—	1	—	—	—	—	—	3	1	—	—	5	—	—	—	10
Public Debt Department ... ..	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	3
Finance Contentieux ... ..	5	—	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	7
Ministry of Public Works ... ..	144	—	—	—	4	5	7	26	81	16	—	11	—	9	42	62	6	—	143	4	—	—	560





TABLE LXXVI.—STATISTICAL RETURN OF THE PROVINCIAL MEDICAL COMMISSIONS.

COMMISSIONS.		CANDIDATES FOR ADMISSION.						EMPLOYEES.							HEIRS.				TOTAL.						
		FIT.			UNFIT.			PENSIONS.							LEAVES.			Expert Opinion taken.		Able to Obtain Livelihood.	Unable to Obtain Livelihood.	Age.	Recommended for Pension for Some Time and Re-examination.		
		At Examination by the Provincial Medical Commission.	Vide Certificates Approved.	Detailed Reports under Art. 12		Vision.	Other Diseases.	Postponed.	Standing Cases of Vision up to December 1914.	Unfit examined by P. M. C.	Unfit <i>vid. Cer.</i> Certificates Approved.	Grand Mal.	Unable to Earn Livelihood.	Able to Earn Livelihood.	Found Fit for Duty.	Granted <i>vide</i> Certificate Approved.	Granted after Examination by P. M. C.	Refused.						Sent to Hospital for Treatment, Observation, and Report.	Age.
				Vision.	Other Diseases.																				
Alexandria	...	103	—	1	—	7	4	7	4	68	—	—	—	25	—	171	16	43	159	2	—	1	—	629	
Suez	...	18	—	—	—	5	9	1	—	—	—	—	—	—	—	35	9	4	21	—	—	—	—	102	
Port Said	...	2	—	—	—	—	—	—	—	29	—	—	—	4	—	22	14	—	28	—	—	—	—	99	
Damietta	...	1	—	—	—	—	—	—	—	2	—	—	—	10	—	20	2	1	—	—	—	—	—	36	
Beheira	...	81	—	—	—	5	4	—	—	75	—	—	—	—	—	241	21	1	2	—	—	—	—	431	
Gharbia	...	48	—	—	—	4	2	3	1	62	—	—	—	—	—	242	33	18	10	2	—	—	—	425	
Menufia	...	77	—	—	—	19	—	15	—	34	—	—	—	14	—	177	14	1	4	—	—	—	—	355	
Daqahlia...	...	79	—	—	—	7	7	1	2	77	—	—	—	—	—	158	23	—	3	1	—	—	—	359	
Sharqia	...	39	—	—	—	—	—	—	—	71	—	—	—	—	—	111	—	5	2	—	—	2	—	230	
Qaliubia...	...	15	—	—	—	—	2	—	—	24	—	—	—	11	—	51	1	9	—	—	—	—	—	113	
Giza	...	33	—	—	—	5	2	—	—	46	—	—	—	3	—	139	17	—	36	1	—	—	—	282	
Beni Suef	...	18	—	—	—	3	18	—	—	1	—	—	—	—	—	98	—	1	5	—	—	—	—	144	
Fayûm	...	6	—	—	—	2	—	—	—	22	—	—	—	11	—	41	7	1	3	—	—	—	—	93	
Minia	...	72	—	—	—	4	7	10	—	53	—	—	—	6	—	194	16	4	2	1	4	5	—	378	
Assiût	...	57	—	—	—	3	1	3	—	31	—	—	—	6	—	128	7	4	32	—	—	—	—	272	
Girga	...	45	—	—	—	—	—	5	—	21	—	—	—	3	—	51	2	8	55	—	—	—	—	191	
Qena...	...	33	—	—	—	22	6	2	—	12	—	—	—	—	—	30	3	3	1	1	—	—	—	113	
Aswân	...	10	—	—	—	8	1	—	—	—	—	—	—	—	—	30	6	—	—	—	—	—	—	55	
TOTAL		737	—	1	—	94	63	47	7	646	—	—	—	93	—	1,939	191	103	363	8	8	7	—	4,307	

# VIII.—REPORT ON THE INSPECTORATE OF PHARMACIES.

Certain information regarding the work of the Inspectorate of Pharmacies in 1914 is contained in the following table and notes :—

TABLE LXXVII.

	CAIRO.		ALEXANDRIA.		PROVINCES.		TOTAL.	
	Pharmacies owned by		Pharmacies owned by		Pharmacies owned by		Pharmacies owned by	
	Qualified Pharmacists.	Unqualified Proprietors.	Qualified Pharmacists.	Unqualified Proprietors.	Qualified Pharmacists.	Unqualified Proprietors.	Qualified Pharmacists.	Unqualified Proprietors.
Existing at end of year... ..	90	50	42	26	65	91	197	167
Inspected and found satisfactory... ..	10	8	16	18	11	29	38	55
Inspected and found unsatisfactory ... ..	2	3	—	3	2	3	4	9
Opened ... ..	3	13	1	14	4	1	8	28
Closed... ..	1	13	1	6	6	17	8	36
<i>Procès-verbaux</i> drawn up for offences against the law of 1904 ... ..	6	10	11	6	11	9	28	25
Condemnations ... ..	1	4	3	3	1	6	5	13
Acquittals ... ..	—	1	—	—	5	2	5	3
Pending ... ..	5	5	8	3	5	1	18	9

1.—132 samples of medicines were taken and analyzed with the following results :—

(a) Four warnings sent to qualified pharmacists (Cairo 1, Alexandria 1, and provinces 2).

(b) Eight warnings sent to unqualified proprietors of pharmacies (Cairo 4, Alexandria 2, and provinces 2).

(c) Four *procès-verbaux* drawn up against qualified pharmacists (Cairo 2, Alexandria 1, and provinces 1). Judgments are pending.

(d) Six *procès-verbaux* drawn up against unqualified proprietors (Cairo 1, Alexandria 1, and provinces 4), resulting in 2 condemnations (provinces) and 4 pending (Cairo 1, Alexandria 1, and provinces 2).

(e) Two *procès-verbaux* drawn up against druggists (Cairo). Judgments are pending.

2.—One hundred and eight samples were found good.

3.—Eighteen samples of *manzûl* were taken and analysed with the following results: 18 *procès-verbaux* were drawn up against the sellers (Cairo 17, provinces 1), resulting in five condemnations (Cairo 4, provinces 1), 2 acquittals (Cairo), and 11 pending (Cairo).



4.—Five authorizations were granted to sell poisons, the total at the end of the year being 75 after the closing of 4 establishments.

5.—Eighty-two offences against the Pharmacy Law had the following results :—

(a) Thirteen warnings sent to qualified pharmacists (Cairo 6, Alexandria 2, and provinces 5).

(b) Six warnings sent to unqualified owners of pharmacies (Cairo 5, Alexandria 1).

(c) Sixty-one *procès-verbaux* drawn up against persons for the illegal practice of pharmacy and sale of poisons (Cairo 10, Alexandria 7, provinces 44), resulting in 18 condemnations (Cairo 2, Alexandria 1, and provinces 15), six acquittals (provinces), and 37 pending (Cairo 8, Alexandria 6, and provinces 23).

(d) Two *procès-verbaux* drawn up against druggists (provinces): 1 condemnation and 1 pending.

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# IX.—REPORT ON THE STORES BRANCH.

Below will be found a number of tables showing the work carried out by this branch of the Department:—

TABLE LXXVIII.—AMBULANCES ISSUED FOR HUMAN PLAGUE IN 1914.

DATE.				MUDIRIA.	DISTRICT.	Number of Beds.
May	16	...	...	Gîza ... ..	Matania ... ..	10
June	2	...	...	Port Said ... ..	Ismailîa ... ..	10
"	16	...	...	Gîza ... ..	Gîza ... ..	10
December	31	...	...	Minia ... ..	Abu Qurqâs ... ..	10
				TOTAL ... ..		40

TABLE LXXIX.—BOXES WITHOUT EQUIPMENT.

DATE.				MUDIRIA.	DISTRICT.	Number.
August	12	...	...	Gîza ... ..	Embaba ... ..	1
September	27	...	...	Port Said ... ..	Port Said ... ..	1
				TOTAL ... ..		2

TABLE LXXX.—AMBULANCES ISSUED FOR SMALLPOX IN 1914.

DATE.				MUDIRIA.	DISTRICT.	Number of Beds.
January	6	...	...	Sharqîa ... ..	Hehia ... ..	20
"	17	...	...	Minia ... ..	Abu Qurqâs ... ..	10
"	20	...	...	Qaliubîa ... ..	Shibîn el Qanâter ... ..	10
"	21	...	...	" ... ..	Qaliûb... ..	10
February	2	...	...	" ... ..	Shibîn el Qanâter ... ..	10
"	8	...	...	Minia ... ..	Minia ... ..	10
"	10	...	...	" ... ..	" ... ..	15
"	15	...	...	Gîza ... ..	Bulâq el Dakrûr ... ..	20
"	18	...	...	Daq'hliâ ... ..	Faraskûr ... ..	10
"	23	...	...	Beni Suef ... ..	Wasta ... ..	15
"	24	...	...	Qaliubîa ... ..	Benha ... ..	10
"	28	...	...	" ... ..	Qaliûb... ..	10
"	28	...	...	Sharqîa ... ..	Zagazig ... ..	10
"	28	...	...	Daqahliâ ... ..	Agha ... ..	10
March	3	...	...	Minia ... ..	Minia ... ..	15
"	4	...	...	Gharbîa ... ..	Kafr el Zayât ... ..	10
"	4	...	...	Qaliubîa ... ..	Shibîn el Qanâter ... ..	10
"	5	...	...	" ... ..	Qaliûb... ..	10
"	5	...	...	Gîza ... ..	El Saff ... ..	5
"	8	...	...	" ... ..	Qanâter el Delta ... ..	10
"	12	...	...	" ... ..	Gîza ... ..	20
"	17	...	...	" ... ..	Qanâter el Delta ... ..	10
"	26	...	...	Qaliubîa ... ..	Shibîn el Qanâter ... ..	5
April	2	...	...	Beni Suef ... ..	Beni Suef ... ..	10
"	5	...	...	Qaliubîa ... ..	Tûkh ... ..	10
"	6	...	...	Gharbîa ... ..	Desûq ... ..	10
"	8	...	...	Beheira ... ..	Dilingât ... ..	20
"	9	...	...	Beni Suef ... ..	Beni Suef ... ..	10
"	11	...	...	Gharbîa ... ..	Kafr el Zayât ... ..	10
"	11	...	...	Beni Suef ... ..	Beni Suef ... ..	10
"	11	...	...	" ... ..	" ... ..	10
"	11	...	...	Gharbîa ... ..	Kafr el Zayât ... ..	10
"	13	...	...	Qaliubîa ... ..	Qaliûb... ..	10
"	16	...	...	Gîza ... ..	Embaba ... ..	10
"	17	...	...	Beni Suef ... ..	Beni Suef ... ..	10
"	17	...	...	Qaliubîa ... ..	Qaliûb... ..	10
"	20	...	...	Beni Suef ... ..	Beni Suef ... ..	20
"	22	...	...	Qaliubîa ... ..	Tûkh ... ..	10
"	22	...	...	Minia ... ..	Abu Qurqâs ... ..	10
"	24	...	...	Gharbîa ... ..	Desûq ... ..	10
"	28	...	...	" ... ..	Tanta ... ..	10
"	29	...	...	" ... ..	" ... ..	10
Carried forward ...						475



TABLE LXXX (continued).—AMBULANCES ISSUED FOR SMALLPOX IN 1914.

DATE.			MUDIRIA.							DISTRICT.					Number of Beds.
										<i>Brought forward</i>					475
April	30	...	Gîza	...	...	...	...	...	...	El Saff	...	...	...	...	10
May	4	...	"	...	...	...	...	...	...	Embaba	...	...	...	...	10
"	6	...	"	...	...	...	...	...	...	"	...	...	...	...	10
"	6	...	Beni Suef	...	...	...	...	...	...	Beni Suef	...	...	...	...	10
"	7	...	Daqahlia	...	...	...	...	...	...	Mit Ghamr	...	...	...	...	10
"	9	...	Qaliubia	...	...	...	...	...	...	Qaliûb...	...	...	...	...	10
"	9	...	"	...	...	...	...	...	...	Tukh	...	...	...	...	10
"	9	...	"	...	...	...	...	...	...	Qaliûb...	...	...	...	...	10
"	10	...	Gharbia	...	...	...	...	...	...	Tanta	...	...	...	...	10
"	16	...	"	...	...	...	...	...	...	"	...	...	...	...	10
"	16	...	Beheira	...	...	...	...	...	...	Itai el Barûd	...	...	...	...	15
"	19	...	"	...	...	...	...	...	...	Shubrakhit...	...	...	...	...	10
"	20	...	Assiût...	...	...	...	...	...	...	Assiût	...	...	...	...	50
"	23	...	Gharbia	...	...	...	...	...	...	Tanta	...	...	...	...	20
"	28	...	Port Said	...	...	...	...	...	...	Ismailia	...	...	...	...	10
"	28	...	Gharbia	...	...	...	...	...	...	Tanta	...	...	...	...	20
June	1	...	"	...	...	...	...	...	...	Kafr el Zayât	...	...	...	...	20
"	4	...	"	...	...	...	...	...	...	Tanta	...	...	...	...	20
"	22	...	Gîza	...	...	...	...	...	...	El Saff	...	...	...	...	10
August	2	...	Gharbia	...	...	...	...	...	...	Tanta	...	...	...	...	20
"	9	...	"	...	...	...	...	...	...	Santa	...	...	...	...	20
"	17	...	Daqahlia	...	...	...	...	...	...	Agha	...	...	...	...	10
"	27	...	"	...	...	...	...	...	...	Mansûra	...	...	...	...	20
"	27	...	"	...	...	...	...	...	...	Agha	...	...	...	...	10
"	29	...	Gîza	...	...	...	...	...	...	Embaba	...	...	...	...	10
September	9	...	Beheira	...	...	...	...	...	...	Damanhûr	...	...	...	...	10
"	17	...	"	...	...	...	...	...	...	"	...	...	...	...	10
December	13	...	"	...	...	...	...	...	...	Rosetta	...	...	...	...	10
										TOTAL	...	...	...	...	870

TABLE LXXXI.—BOXES WITHOUT EQUIPMENT (SMALLPOX).

DATE.			MUDIRIA.							DISTRICT.					Number of Beds.
January	10	...	Menufia	...	...	...	...	...	...	Menûf...	...	...	...	...	1
"	24	...	Gîza	...	...	...	...	...	...	El 'Ayât	...	...	...	...	1
February	28	...	Gharbia	...	...	...	...	...	...	Zifta	...	...	...	...	1
March	4	...	Beni Suef	...	...	...	...	...	...	Beni Suef	...	...	...	...	1
"	5	...	Fayûm	...	...	...	...	...	...	Etsa	...	...	...	...	1
"	8	...	Menûfia	...	...	...	...	...	...	Menûf...	...	...	...	...	1
"	11	...	Gîza	...	...	...	...	...	...	Gîza	...	...	...	...	1
"	24	...	"	...	...	...	...	...	...	"	...	...	...	...	1
May	25	...	Menufia	...	...	...	...	...	...	Tala	...	...	...	...	1
"	25	...	"	...	...	...	...	...	...	Menûf...	...	...	...	...	1
June	2	...	Daqahlia	...	...	...	...	...	...	Mit Ghamr...	...	...	...	...	1
"	2	...	Fayûm	...	...	...	...	...	...	Etsa	...	...	...	...	1
"	2	...	Daqahlia	...	...	...	...	...	...	Mit Ghamr...	...	...	...	...	1
"	2	...	Beheira	...	...	...	...	...	...	Kafr el Dawâr	...	...	...	...	1
"	9	...	Menufia	...	...	...	...	...	...	Shibîn el Kôm	...	...	...	...	1
July	18	...	"	...	...	...	...	...	...	Ashmûn	...	...	...	...	1
"	18	...	Daqahlia	...	...	...	...	...	...	Mit Ghamr...	...	...	...	...	1
August	2	...	Beheira	...	...	...	...	...	...	Damanhûr	...	...	...	...	1
"	9	...	Daqahlia	...	...	...	...	...	...	Mansûra	...	...	...	...	1
"	10	...	Menufia	...	...	...	...	...	...	Tala	...	...	...	...	1
"	10	...	Daqahlia	...	...	...	...	...	...	Dekernes	...	...	...	...	1
"	12	...	Menufia	...	...	...	...	...	...	Qesna	...	...	...	...	1
September	2	...	Gharbia	...	...	...	...	...	...	Kafr el Sheikh	...	...	...	...	1
"	2	...	Beheira	...	...	...	...	...	...	Abu Hommos	...	...	...	...	1
"	2	...	Menufia	...	...	...	...	...	...	Denchewai...	...	...	...	...	1
"	5	...	Gharbia	...	...	...	...	...	...	Mahalla el Kubra	...	...	...	...	1
"	29	...	Daqahlia	...	...	...	...	...	...	Agha	...	...	...	...	1
October	7	...	Beheira	...	...	...	...	...	...	Kafr Dawar	...	...	...	...	1
"	14	...	"	...	...	...	...	...	...	Kôm Hamâda	...	...	...	...	1
"	15	...	Menufia	...	...	...	...	...	...	Shibîn el Kôm	...	...	...	...	1
"	20	...	Daqahlia	...	...	...	...	...	...	Mit Ghamr...	...	...	...	...	1
"	28	...	"	...	...	...	...	...	...	"	...	...	...	...	1
November	14	...	Aswân...	...	...	...	...	...	...	Aswân...	...	...	...	...	4
"	21	...	Daqahlia	...	...	...	...	...	...	Agha	...	...	...	...	1
"	28	...	Fayûm	...	...	...	...	...	...	Etsa	...	...	...	...	1
										TOTAL	...	...	...	...	38

TABLE LXXXII.—AMBULANCES ISSUED FOR FEVER IN 1914.

DATE.				MUDIRIA.					DISTRICT.					Number of Beds.
January	10	...	...	Qaliubîa	...	...	...	...	Qaliûb...	...	...	...	...	10
"	10	...	...	"	...	...	...	...	"	...	...	...	...	5
"	15	...	...	Beheira	...	...	...	...	Kafr el Dawâr	...	...	...	...	10
"	20	...	...	"	...	...	...	...	Damanhûr	...	...	...	...	10
"	26	...	...	"	...	...	...	...	Abu Hommos	...	...	...	...	15
February	2	...	...	"	...	...	...	...	Damanhûr	...	...	...	...	10
"	8	...	...	Gharbîa	...	...	...	...	Mahalla el Kubra	...	...	...	...	20
"	9	...	...	Beheira	...	...	...	...	Teh el Barûd	...	...	...	...	10
"	10	...	...	Daqahlia	...	...	...	...	Dekernes	...	...	...	...	10
"	10	...	...	"	...	...	...	...	"	...	...	...	...	10
"	10	...	...	Minia	...	...	...	...	Beni Mazar	...	...	...	...	10
"	15	...	...	"	...	...	...	...	"	...	...	...	...	20
"	15	...	...	Daqahlia	...	...	...	...	Dekernes	...	...	...	...	20
"	15	...	...	Beheira	...	...	...	...	Teh el Barûd	...	...	...	...	5
"	16	...	...	"	...	...	...	...	"	...	...	...	...	10
"	17	...	...	"	...	...	...	...	Shubrakhit	...	...	...	...	10
"	19	...	...	"	...	...	...	...	Kôm Hamâda	...	...	...	...	30
"	25	...	...	"	...	...	...	...	Damanhûr	...	...	...	...	10
"	26	...	...	Daqahlia	...	...	...	...	Dekernes	...	...	...	...	10
"	26	...	...	"	...	...	...	...	Mansûra	...	...	...	...	10
"	26	...	...	Gharbîa	...	...	...	...	Sherbîn	...	...	...	...	20
"	28	...	...	Beheira	...	...	...	...	Teh el Barûd	...	...	...	...	10
"	28	...	...	Gharbîa	...	...	...	...	Belqâs	...	...	...	...	10
"	28	...	...	Beheira	...	...	...	...	Damanhûr	...	...	...	...	10
March	3	...	...	"	...	...	...	...	Teh el Barûd	...	...	...	...	10
"	3	...	...	Daqahlia	...	...	...	...	Mansûra	...	...	...	...	10
"	4	...	...	"	...	...	...	...	Mataria	...	...	...	...	10
"	5	...	...	Beheira	...	...	...	...	Damanhûr	...	...	...	...	5
"	7	...	...	Daqahlia	...	...	...	...	Manzala	...	...	...	...	20
"	8	...	...	Gharbia	...	...	...	...	Kafr el Sheikh	...	...	...	...	25
"	11	...	...	"	...	...	...	...	Kafr el Zayât	...	...	...	...	10
"	12	...	...	Daqahlia	...	...	...	...	Agha	...	...	...	...	10
"	14	...	...	Gharbia	...	...	...	...	Belqâs	...	...	...	...	20
"	14	...	...	"	...	...	...	...	Mansûra	...	...	...	...	10
"	14	...	...	Beheira	...	...	...	...	Kôm Hamâda	...	...	...	...	10
"	14	...	...	Daqahlia	...	...	...	...	Manzala	...	...	...	...	20
"	15	...	...	Gharbîa	...	...	...	...	Desûq	...	...	...	...	10
"	15	...	...	Beheira	...	...	...	...	Kafr el Dawâr	...	...	...	...	10
"	16	...	...	Gharbîa	...	...	...	...	Desûq	...	...	...	...	10
"	18	...	...	Daqahlia	...	...	...	...	Faraskûr	...	...	...	...	10
"	19	...	...	"	...	...	...	...	Mansûra	...	...	...	...	20
"	21	...	...	Beheira	...	...	...	...	Abu Hommos	...	...	...	...	10
"	23	...	...	Daqahlia	...	...	...	...	Faraskûr	...	...	...	...	10
"	28	...	...	Minia	...	...	...	...	Maghagha	...	...	...	...	25
"	28	...	...	Beheira	...	...	...	...	Teh el Barûd	...	...	...	...	10
"	29	...	...	Gharbîa	...	...	...	...	Kafr el Sheikh	...	...	...	...	20
"	31	...	...	Beheira	...	...	...	...	Teh el Barûd	...	...	...	...	10
April	1	...	...	Gharbia	...	...	...	...	Kafr el Sheikh	...	...	...	...	20
"	2	...	...	Menufia	...	...	...	...	Shibîn el Kôm	...	...	...	...	10
"	4	...	...	Gharbîa	...	...	...	...	Talkha	...	...	...	...	15
"	4	...	...	Daqahlia	...	...	...	...	Faraskûr	...	...	...	...	20
"	6	...	...	Gharbîa	...	...	...	...	Desûq	...	...	...	...	10
"	8	...	...	Beheira	...	...	...	...	Delingât	...	...	...	...	20
"	9	...	...	"	...	...	...	...	Abu Hommos	...	...	...	...	10
"	18	...	...	"	...	...	...	...	Teh el Barûd	...	...	...	...	15
"	22	...	...	"	...	...	...	...	Shubrakhit	...	...	...	...	10
"	23	...	...	"	...	...	...	...	Abu Hommos	...	...	...	...	20
"	23	...	...	Daqahlia	...	...	...	...	Faraskûr	...	...	...	...	10
"	25	...	...	Beheira	...	...	...	...	Delingât	...	...	...	...	10
"	25	...	...	"	...	...	...	...	"	...	...	...	...	10
"	25	...	...	"	...	...	...	...	Teh el Barûd	...	...	...	...	5
"	27	...	...	Giza	...	...	...	...	Embaba	...	...	...	...	10
"	30	...	...	Gharbîa	...	...	...	...	Santa	...	...	...	...	10
"	30	...	...	Beheira	...	...	...	...	Damanhûr	...	...	...	...	10
May	2	...	...	Giza	...	...	...	...	Embaba	...	...	...	...	10
"	6	...	...	Beheira	...	...	...	...	Kafr el Dawâr	...	...	...	...	15
"	9	...	...	Giza	...	...	...	...	Giza	...	...	...	...	15
"	10	...	...	Gharbîa	...	...	...	...	Tanta	...	...	...	...	10
"	11	...	...	"	...	...	...	...	Talkha	...	...	...	...	10
"	11	...	...	"	...	...	...	...	Desûq	...	...	...	...	20
"	13	...	...	Daqahlia	...	...	...	...	Mansûra	...	...	...	...	10
"	13	...	...	Beheira	...	...	...	...	Shubrakhit	...	...	...	...	20

Carried forward ... 925



TABLE LXXXII (*continued*).—AMBULANCES ISSUED FOR FEVER IN 1914.

DATE.				MUDIRIA.					DISTRICT.					Number of Beds.
									<i>Brought forward</i> ...					925
May	19	...	...	Daqahlîa	...	...	...	...	Mansûra	...	...	...	...	10
"	20	...	...	Alexandria	...	...	...	...	Shatby	...	...	...	...	30
"	21	...	...	Gharbîa	...	...	...	...	Samannûd	...	...	...	...	20
"	21	...	...	Daqahlîa	...	...	...	...	Mansûra	...	...	...	...	30
"	22	...	...	Beheira	...	...	...	...	Damanhûr	...	...	...	...	10
"	24	...	...	"	...	...	...	...	Teh el Barûd	...	...	...	...	10
"	25	...	...	"	...	...	...	...	"	...	...	...	...	10
"	31	...	...	"	...	...	...	...	"	...	...	...	...	15
June	2	...	...	Daqahlîa	...	...	...	...	Mansûra	...	...	...	...	30
"	2	...	...	Alexandria	...	...	...	...	El Raml	...	...	...	...	10
"	3	...	...	"	...	...	...	...	"	...	...	...	...	10
"	6	...	...	Daqahlîa	...	...	...	...	Dekernes	...	...	...	...	20
"	7	...	...	Beheira	...	...	...	...	Damanhûr	...	...	...	...	10
"	17	...	...	Gharbîa	...	...	...	...	Bassiûn	...	...	...	...	20
"	18	...	...	Daqahlîa	...	...	...	...	Dekernes	...	...	...	...	20
"	19	...	...	Gharbîa	...	...	...	...	Kafr el Zayât	...	...	...	...	20
"	20	...	...	Beheira	...	...	...	...	Shubrahût	...	...	...	...	10
"	20	...	...	Gharbîa	...	...	...	...	Kafr el Zayât	...	...	...	...	10
"	24	...	...	Beheira	...	...	...	...	Teh el Barûd	...	...	...	...	15
"	24	...	...	Daqahlîa	...	...	...	...	Dekernes	...	...	...	...	20
"	25	...	...	Qaliubîa	...	...	...	...	Tûkh	...	...	...	...	10
"	25	...	...	"	...	...	...	...	Qanâter el Delta	...	...	...	...	10
"	27	...	...	Beheira	...	...	...	...	Damanhûr	...	...	...	...	10
"	28	...	...	Daqahlîa	...	...	...	...	Agha	...	...	...	...	10
"	30	...	...	"	...	...	...	...	Dekernes	...	...	...	...	10
July	2	...	...	Qaliubîa	...	...	...	...	Tûkh	...	...	...	...	10
"	3	...	...	Beheira	...	...	...	...	Teh el Barûd	...	...	...	...	10
"	9	...	...	Qaliubîa	...	...	...	...	Benha	...	...	...	...	10
"	14	...	...	"	...	...	...	...	"	...	...	...	...	10
"	18	...	...	Daqahlîa	...	...	...	...	Matarîa	...	...	...	...	20
August	10	...	...	Beheira	...	...	...	...	Abu Hommos	...	...	...	...	10
September	21	...	...	Daqahlîa	...	...	...	...	Agha	...	...	...	...	10
December	8	...	...	"	...	...	...	...	Dekernes	...	...	...	...	10
"	10	...	...	Qaliubîa	...	...	...	...	Qaliûb...	...	...	...	...	10
"	10	...	...	Daqahlîa	...	...	...	...	Dekernes	...	...	...	...	20
"	26	...	...	Qaliubîa	...	...	...	...	Benha	...	...	...	...	20
									TOTAL ...					1,445

TABLE LXXXIII.—BOXES WITHOUT EQUIPMENT (FEVER).

DATE.				MUDIRIA.					DISTRICT.					Number.
January	14	...	...	Beheira	...	...	...	...	Kafr el Dawâr	...	...	...	...	1
"	20	...	...	Menufia	...	...	...	...	Ashmûn	...	...	...	...	1
"	20	...	...	Girga	...	...	...	...	Tema	...	...	...	...	1
"	25	...	...	Menufia	...	...	...	...	Menûf...	...	...	...	...	1
"	26	...	...	"	...	...	...	...	"	...	...	...	...	1
February	2	...	...	Daqahlîa	...	...	...	...	Agha	...	...	...	...	1
"	15	...	...	"	...	...	...	...	Mit Ghamr	...	...	...	...	1
"	21	...	...	Girga	...	...	...	...	Sohâg	...	...	...	...	3
March	4	...	...	Beni Suef	...	...	...	...	Beni Suef	...	...	...	...	2
May	20	...	...	Daqahlîa	...	...	...	...	Agha	...	...	...	...	1
"	20	...	...	"	...	...	...	...	Menzala	...	...	...	...	1
"	25	...	...	Menufia	...	...	...	...	Tala	...	...	...	...	1
"	25	...	...	"	...	...	...	...	Menûf...	...	...	...	...	1
"	28	...	...	"	...	...	...	...	"	...	...	...	...	1
"	28	...	...	"	...	...	...	...	Shibîn el Kôm	...	...	...	...	1
June	2	...	...	Assiût	...	...	...	...	Samalût	...	...	...	...	1
"	9	...	...	Menufia	...	...	...	...	Shibîn el Kôm	...	...	...	...	1
July	18	...	...	Daqahlîa	...	...	...	...	Dekernes	...	...	...	...	1
"	18	...	...	"	...	...	...	...	Simbellawein	...	...	...	...	1
"	18	...	...	"	...	...	...	...	Mansûra	...	...	...	...	1
"	18	...	...	Beheira	...	...	...	...	Kafr el Dawâr	...	...	...	...	1
"	18	...	...	Sharqia	...	...	...	...	Kafr Saqr	...	...	...	...	1
August	27	...	...	Daqahlîa	...	...	...	...	Faraskûr	...	...	...	...	1
"	29	...	...	Qaliubia	...	...	...	...	Tûkh	...	...	...	...	1
September	2	...	...	Gharbîa	...	...	...	...	Kafr el Sheikh	...	...	...	...	1
November	14	...	...	Daqahlîa	...	...	...	...	Mansûra	...	...	...	...	1
"	14	...	...	Minia	...	...	...	...	Abu Qurqâs	...	...	...	...	1
									TOTAL ...					30

TABLE LXXXIV.—AMBULANCES ISSUED FOR CHOLERA IN 1914.

DATE.				MUDIRIA.	DISTRICT.	Number of Beds.
January	11	...	...	Port Said ... ..	Qantara ... ..	10

TABLE LXXXV.—VARIOUS RINDERPEST SERA ISSUED IN 1914.

MONTH OF ISSUE.										Doses of 50 c.c.
Egyptian Serum.										
January	...	...	...	...	...	...	...	...	...	22,077
February	...	...	...	...	...	...	...	...	...	7,357·5
March...	...	...	...	...	...	...	...	...	...	21,370·5
April	...	...	...	...	...	...	...	...	...	24,390
May	...	...	...	...	...	...	...	...	...	63,931·5
June	...	...	...	...	...	...	...	...	...	60,367·5
July	...	...	...	...	...	...	...	...	...	32,386·5
August	...	...	...	...	...	...	...	...	...	486
September	...	...	...	...	...	...	...	...	...	1,516·5
October	...	...	...	...	...	...	...	...	...	1,611
November	...	...	...	...	...	...	...	...	...	396
December	...	...	...	...	...	...	...	...	...	553·5
TOTAL OF DOSES ... ..										236,443·5
Indian Serum.										
January	...	...	...	...	...	...	...	...	...	2,130
February	...	...	...	...	...	...	...	...	...	877
TOTAL OF DOSES ... ..										3,007

TABLE LXXXVI.—LIST SHOWING ADJUDICATIONS PREPARED IN 1914.

	L. E.
Petroleum and crude oil ... ..	1,998
Milk in tins ... ..	285
Flour ... ..	6,820
Meat ... ..	2,902
Bread ... ..	2,723
Straw bedding ... ..	618
<i>Bersim</i> (Scavenging and Watering Service)... ..	902
„ (Serum Institute)... ..	526
Soap, washing ... ..	867
Rabbits ... ..	185
Green <i>dura</i> for Serum Institute ... ..	648
Bulls for Serum Institute... ..	6,552
Forage for Serum Institute ... ..	10,732
<i>Tibn</i> for Scavenging and Watering Service... ..	2,175
Rations, Cairo Hospitals ... ..	11,000
„ Provincial Hospitals ... ..	12,000
Water vans ... ..	234
Ice ... ..	260
Spirit ... ..	458
Equipment for 1914-1915 ... ..	14,967
Drugs for 1914-1915 (including Prisons, Coast Guards Administrations and Ministry of Education) ... ..	4,444
Dressings, cotton, gauze and lint ... ..	4,025
Drugs for 1914-1915, local ... ..	3,886
Coal ... ..	4,500



TABLE LXXXVII.—GALENICAL PREPARATIONS AND SPECIALITIES PREPARED  
IN THE DRUG STORES IN 1914.

Distilled water... ..	kilos	26,000
Medicinal waters ... ..	"	1,353
Liniments ... ..	"	2,915
Liquors and solutions ... ..	"	9,079
Mixtures ... ..	"	7,163
Powders, compound ... ..	"	288
Syrups ... ..	"	4,862
Tinctures ... ..	"	3,251
Ointments ... ..	"	4,060
Wines, compound ... ..	"	866
Eye-drops ... ..	"	1,025
Ampoules, sterilized ... ..	number	358
Bandages ... ..	"	317,430
<i>Specialities :—</i>		
Carlsbad salt ... ..	bottles	125
Castor oil ... ..	"	14,500
Drinks, veterinary ... ..	"	599
Eye-drops ... ..	"	26,185
Eye powders ... ..	boxes	4,750
Syrups ... ..	bottles	1,844
Tablets, sublimate ... ..	"	323
Tar water ... ..	"	180
Wine, cinchona ... ..	"	640
Boxes, barbers', first aid chests ... ..	"	149

AMBULANCES USED DURING THE YEAR 1914.

Ist Class Ambulances ... ..	192 times
IInd " " ... ..	502 "
IIIrd " " ... ..	760 "
IVth " " ... ..	1,332 "
TOTAL ... ..	2,786 times

Cars for transport of goods, etc., were used 8,562 times.

The Transport Section employs eighteen mules and one horse.

ORDERS PLACED LOCALLY AND ABROAD DURING 1914.

Special orders ... ..	54 orders.
Stores chapter ... ..	1,284 "
Epidemic... ..	205 "
Prophylactic and miscellaneous ... ..	189 "
TOTAL ... ..	1,732 orders.

WORKSHOPS.

During the year 1914 about 13,000 instruments were sharpened in the workshops.

The workshops have also made in the same year :—

49,000 lead discs for ophthalmic hospitals.

6,000 tin discs for ankylostoma hospitals.

X.—REPORT ON THE ENGINEERING BRANCH.

The following tables show the work which has been done by this branch of the Department.

The programmes both of new work and repairs to existing buildings had to be considerably curtailed owing to the reduction of credits consequent on the outbreak of the war.

TABLE LXXXVIII.—SPECIAL CREDITS FOR NEW WORKS.

NAME OF WORK.	Reduced Grant for Year 1914.*	Expenditure from April 1 to December 31, 1914.	Total Expenditure to December 31, 1914.
	L.E.	L.E.	L.E.
Alexandria Hospital.—Completion of 1912 pavilion ... ..	96	96	7,506
Alexandria Hospital.—Completion of matron's house ... ..	1,428	1,308	2,144
Alexandria Hospital.—New pavilion 1914 ...	1,940	1,080	1,080
Fayûm Hospital.—Completion out-patients' department ... ..	513	507	1,399
Zagazig.—Completion infectious hospital ... ..	717	673	1,937
Damanhour.—New disinfecting station ... ..	777	749	749
Qasr el 'Aini Hospital.—New battery ... ..	480	9	9
Sohag Ophthalmic Hospital.—Cupboards and shelves ... ..	122	95	95
Shibîn el Kôm Ophthalmic Hospital.—Cupboards and shelves ... ..	124	105	105
Minia Ophthalmic Hospital.—Tables... ..	33	12	12
Sanitation of Waqfs' Mosques.—Government share) ... ..	2,500	428	428
Cemeteries grant ... ..	828	529	529
TOTAL ... ..	9,558	5,591	15,993

*Repairs.*—The repairs credit was for the Interim Budget (January, February, and March) L.E. 2,273, for 1914 L.E. 7,290 reduced to L.E. 5,790, a total of L.E. 8,063. The expenditure was L.E. 7,553.

TABLE LXXXIX.—REPAIRS EFFECTED.

NAME OF BUILDING.	Interim Budget. Jan. Feb. Mar.		April-Dec. 1914.		NAME OF BUILDING.	Interim Budget. Jan. Feb. Mar.		April-Dec. 1914.	
	L.E.	M.	L.E.	M.		L.E.	M.	L.E.	M.
Alexandria Hospital... ..	30	764	25	682	<i>Brought forward</i> ...	1,542	269	4,067	853
Assiût Hospital... ..	3	420	4	333	Tanta Opht. Hospital ...	1	500	58	949
Assiût Ophthalmic Hospital	—	—	4	785	Zagazig Hospital ... ..	2	380	13	231
Abbassia Fever Hospital... ..	11	720	50	384	Zagazig Opht. Hospital ...	—	—	1	289
Abbassia Lunatic Asylum	131	730	149	713	Building Central Adminis-				
Aswân Hospital... ..	—	600	40	079	tration ... ..	31	364	172	697
Beni Suef Hospital ... ..	123	536	561	875	Public latrines ... ..	8	379	17	456
Benha Hospital... ..	—	—	4	466	Disinfecting stations ...	—	—	35	140
Damanhûr Hospital... ..	1	300	340	642	S. and W. S. and Cairo				
Damietta Hospital ... ..	—	720	4	720	Destructor ... ..	6	038	80	750
Fayûm Hospital ... ..	447	414	121	982	Miscellaneous Hospitals...	266	878	227	129
Hôd el Marsûd Hospital... ..	20	489	5	737	Veterinary Infirmary and				
Mansûra Hospital ... ..	454	126	805	583	Dogs' Home ... ..	9	833	—	—
Mansûra Opht. Hospital ...	1	365	33	657	Cairo <i>Abattoirs</i> ... ..	77	030	10	208
Qasr el 'Aini Hospital ... ..	92	111	382	271	Ismailia <i>Abattoirs</i> ... ..	3	130	—	220
Qena Hospital ... ..	—	—	75	097	Qafr el Sheikh <i>Abattoirs</i> ...	1	270	—	—
Khanka Asylum ... ..	44	125	47	064	Maghagha <i>Abattoirs</i> ...	—	—	2	868
Minia Hospital ... ..	115	967	456	410	Nag' Hamâdi <i>Abattoirs</i> ...	1	260	—	—
Port Said Hospital ... ..	25	508	21	723	Samallînt <i>Abattoirs</i> ... ..	—	—	23	375
Shibîn el Kôm Hospital ... ..	—	640	8	719	Miscellaneous <i>Abattoirs</i> ...	1	600	—	—
Sohag Hospital... ..	—	—	18	878	Salaries monthly paid work-				
Suez Hospital ... ..	25	978	9	870	men and foremen of				
Tanta Hospital ... ..	10	756	894	183	works ... ..	230	950	659	800
<i>Carried forward</i> ...	1,542	269	4,067	853	TOTAL ... ..	2,183	881	5,370	965

\* The sum originally granted was L.E. 18,811.



TABLE XC.—WORKS PAID FOR BY OTHER DEPARTMENTS.

DESIGNATION OF WORK.	Interim Budget Jan., Feb., March.	April to December.
	L.E.	L.E.
On Public Works Department Credit.—Sanitary work Insha Palace ... ..	—	108
On Deposit from Shāwarbī Pasha's Wakfs.—Sanitary works and sundry repairs Shawarbi Hospital, Qaliûb ... ..	7	33
On Scavenging and Watering Service Credit.—Modification of Abu el 'Ela stables and building new stores ... ..	198	1
On Cholera Credit :—		
Repairs to Sanitary Office of Alexandria Port ... ..	5	—
Repairs to Chatby Hospital ... ..	10	—
Repairs to west boundary wall, Chatby Lazaret ... ..	8	—
On Ankylostoma Credit :—		
Making portable tank and teak wood sink with iron stand for Ankylostoma Hospital, Qaliûb, and plastering kiosk ... ..	26	6
Fitting up sink and water supply to Ankylostoma Hospital, El Deir ... ..	—	20
Four portable tanks, etc., Belbeis, Mîna el Qamh, Zagazig ... ..	—	73
Ankylostoma Hospital, Kalama ... ..	—	5
On Serum Institute Credit.—Sundry repairs to stables ... ..	—	28

*Sanitary Installations.*—The following is the work done under this heading :—

Installations approved, 8; examined and reported upon, 29; *établissements insalubres*, examined and modifications suggested, 157; approved, 53; baths approved, 5.

Mosques (old) : information asked for, 268; examined and reported on, 652. (New) : plans of private mosques approved, 32; plans of Waqfs Administration mosques approved, 8.

Houses : examined and approved, 9.

TABLE XCI.—DELIMITATION OF CEMETERIES (DEPARTMENTAL).

MUDIRIA.	MARKAZ.	Number of Cemeteries.	Number of Posts.
Beheira ... .. {	Kôm Hamâda ... ..	1	7
	Delingât ... ..	5	40
	TOTAL ... ..	6	47
Daqahlia ... .. {	Simbellawein ... ..	3	39
	Agha ... ..	3	31
	Mit Ghamr... ..	2	19
	TOTAL ... ..	8	89
Menufia ... .. {	Ashmûn ... ..	2	24
	Menûf ... ..	1	15
	Tala ... ..	2	10
	Quesna ... ..	1	14
	TOTAL ... ..	6	63
	GENERAL TOTAL ...	20	199

TABLE XCII.—DELIMITATION OF CEMETERIES ON NATIVES' ACCOUNT.

MUDIRIA.	MARKAZ.	Number of Cemeteries.	Number of Posts.
Gharbîa ... .. {	Tanta ... ..	1	9
	Santa ... ..	1	4
	Borollos ... ..	1	12
	TOTAL ... ..	3	25
Qaliubîa ... .. {	Benha ... ..	1	4
	Tûkh ... ..	1	14
	TOTAL ... ..	2	18
Beheira ... .. {	Etiai ... ..	1	4
	Damanhûr ... ..	1	15
	TOTAL ... ..	2	19
Sharqîa ... .. {	Zagazig ... ..	3	34
	Mîna el Qamh ... ..	1	4
	Faqqûs ... ..	1	4
	TOTAL ... ..	5	42
Menufîa ... ..	Menûf... ..	2	5
Beni Suef ... ..	Beni Suef ... ..	1	4
	GENERAL TOTAL ...	16	118



# XI.—GENERAL.

## 1.—AUTHORIZATIONS.

The total number of authorizations to practise medicine, etc., granted during 1914, amounted to 201, sub-divided as follows:—

TABLE XCIII.

AUTHORIZATIONS.	NATIONALITY.										TOTAL.	
	British.	French.	German.	Russian.	Austrian.	Ottoman.	Greek.	Egyptian.	Bulgarian.	Italian.	1914	1913
Medical ... ..	5	1	—	7	—	29	2	50	—	2	106	77
Pharmaceutical:—												
(1) Pharmacists ... ..	1	—	1	—	—	14	5	4	—	—	25	25
(2) Assistant pharmacists	—	—	—	2	—	17	5	5	—	—	29	69
Veterinary ... ..	1	—	—	—	—	—	—	7	—	—	8	6
Midwifery ... ..	—	2	2	—	2	—	3	8	—	5	22	23
Dental ... ..	1	—	—	—	—	3	4	—	1	2	11	7

## 2.—POPULATION.

The following table shows the Egyptian and foreign population of the principal towns, governorates, and chief towns of provinces of Egypt, estimated up to July 1, 1914:—

TABLE XCIV.

TOWN.	1913.			1914.		
	Egyptians	Foreigners.	Total.	Egyptians.	Foreigners	Total.
Cairo ... ..	646,812	68,797	715,609	655,200	70,875	726,075
Alexandria... ..	333,165	74,091	407,256	337,781	75,830	413,611
Damietta ... ..	34,464	263	34,727	35,142	265	35,407
Tanta ... ..	55,456	1,502	56,958	56,114	1,509	57,623
Mansûra ... ..	42,070	1,638	43,708	42,635	1,638	44,273
Damanhûr ... ..	43,442	372	43,814	44,469	372	44,841
Zagazîg ... ..	36,022	1,673	37,695	36,473	1,679	38,152
Shibîn el Kôm... ..	24,572	182	24,754	25,070	182	25,252
Gîza ... ..	17,645	108	17,753	17,880	110	17,990
Benha... ..	18,159	214	18,373	18,674	216	18,890
Port Said ... ..	46,666	10,738	57,404	48,066	10,738	58,804
Suez ... ..	17,327	2,551	19,878	17,540	2,551	20,091
Ismailia ... ..	10,908	2,270	13,178	11,382	2,288	13,670
Fayûm ... ..	39,812	177	39,989	40,321	178	40,499
Beni Suef ... ..	28,053	384	28,437	28,998	399	29,397
Minia ... ..	28,818	412	29,230	29,278	419	29,697
Assiût... ..	42,131	271	42,402	42,477	274	42,751
Sohâg ... ..	19,341	67	19,408	19,524	67	19,591
Qena ... ..	20,909	72	20,981	21,099	72	21,171
Aswân... ..	12,394	605	12,999	12,434	638	13,072
TOTAL ... ..	1,518,166	166,387	1,684,553	1,540,557	170,300	1,710,857

3.—BIRTHS AND DEATHS AND INFANT MORTALITY.

TABLE XCV.—EGYPTIANS.

TOWN.	TOTAL.				INFANT DEATHS.		PROPORTION PER CENT OF INFANT MORTALITY.		
	Births.		Deaths.		Under 1 Year.	From 1 to 10 Years.	Deaths under 1 Year.		From 1 to 10 Years.
	Number.	Per Thousand.	Number.	Per Thousand.			To Births.	To Deaths.	To Deaths.
Cairo ... ..	30,745	46·9	25,892	39·5	8,963	7,279	29·2	34·6	28·1
Alexandria... ..	15,263	45·2	10,726	31·8	3,708	2,919	24·2	34·6	27·2
Damietta ... ..	1,405	40·0	692	19·7	209	179	14·9	30·2	25·9
Port Said ... ..	2,367	49·3	1,197	24·9	417	307	17·6	34·8	25·6
Suez ... ..	828	47·2	625	35·6	200	142	24·2	32·0	22·7
Ismailia ... ..	896	78·7	408	35·8	114	112	12·7	27·9	27·5
Benha ... ..	652	34·9	470	25·2	173	128	26·5	36·8	27·2
Zagazig ... ..	1,587	43·5	1,209	33·1	392	393	24·7	32·4	32·5
Tanta ... ..	3,168	50·6	2,332	41·6	747	626	23·6	32·0	26·8
Mansûra ... ..	1,942	45·5	1,484	34·8	416	406	21·4	28·0	27·4
Shibîn el Kôm ... ..	1,225	48·9	619	24·7	199	139	16·2	32·1	22·5
Damanhûr ... ..	2,214	49·8	1,451	32·6	547	451	24·7	37·7	31·1
Gîza ... ..	1,024	57·3	843	47·1	333	268	32·5	39·5	31·8
Fayûm ... ..	2,453	60·8	1,855	46·0	809	586	33·0	43·6	31·6
Beni Suef ... ..	1,374	47·4	946	32·6	359	274	26·1	37·9	29·0
Minia ... ..	1,726	59·0	1,190	40·6	489	309	28·3	41·1	26·0
Assiût ... ..	2,383	56·1	1,917	45·1	680	602	28·7	35·5	31·4
Sohâg ... ..	966	49·5	876	44·9	273	310	28·3	31·2	35·4
Qena ... ..	1,163	55·1	1,203	57·0	429	418	36·9	35·7	34·7
Aswân... ..	460	37·1	488	39·2	131	130	28·5	26·8	26·6
TOTAL ... ..	73,841	47·9	56,423	36·6	19,588	15,978	26·5	34·7	28·3



TABLE XCVI.—FOREIGNERS.

TOWN.	TOTAL.				INFANT DEATHS.		PROPORTION PER CENT OF INFANT MORTALITY.		
	Births. *		Deaths.		Under 1 Year.	From 1 to 10 Years.	Deaths under 1 Year.		From 1 to 10 Years.
	Number.	Per Thousand.	Number.	Per Thousand.			To Births*	To Deaths.	To Deaths.
Cairo ... ..	568	8·0	815	11·5	132	102	—	16·2	12·5
Alexandria... ..	1,338	17·6	985	13·0	143	119	—	14·5	12·1
Damietta ... ..	4	15·1	3	11·3	1	—	—	33·3	—
Port Said ... ..	273	25·4	194	18·1	26	30	—	13·4	15·5
Suez ... ..	56	22·0	86	33·7	9	9	—	10·5	10·5
Ismailia ... ..	109	47·6	46	20·1	7	8	—	15·2	17·4
Benha ... ..	8	37·0	3	13·9	2	—	—	66·7	—
Zagazig ... ..	28	16·7	16	9·5	4	5	—	25·0	31·3
Tanta ... ..	15	9·9	10	6·6	1	3	—	10·0	30·0
Mansûra ... ..	36	22·0	23	14·0	4	9	—	17·4	39·1
Shibîn el Kôm ... ..	1	5·5	5	27·5	—	2	—	—	40·0
Damanhûr ... ..	5	13·4	1	2·7	—	1	—	—	100·0
Gîza ... ..	3	27·3	8	72·7	—	3	—	—	37·5
Fayûm ... ..	7	39·3	3	16·9	1	1	—	33·3	33·3
Beni Suef ... ..	6	15·0	3	7·5	1	—	—	33·3	—
Minia ... ..	2	4·8	3	7·2	1	1	—	33·3	33·3
Assiût ... ..	14	51·1	10	36·5	1	3	—	10·0	30·0
Sohâg ... ..	2	29·9	1	14·9	—	—	—	—	—
Qena ... ..	—	—	—	—	—	—	—	—	—
Aswân... ..	—	—	3	4·7	—	—	—	—	—
TOTAL ... ..	2,475	14·5	2,218	13·0	333	296	—	15·0	13·3

\* Births of foreigners cannot be considered as exact, as they are not all notified.

TABLE XCVII.—COMPARATIVE TABLE OF THE RATES OF EGYPTIAN INFANT MORTALITY, 1910-1914.

(Per Cent of Births.)

TOWN.	1910.	1911.	1912.	1913.	1914.
Cairo ... ..	29·2	31·9	29·9	29·3	29·2
Alexandria ... ..	27·8	26·9	27·6	25·7	24·2
Damietta ... ..	16·5	18·1	14·9	15·0	14·9
Port Said ... ..	23·6	21·1	21·8	22·9	17·6
Suez ... ..	28·4	26·9	26·8	29·4	24·2
Ismailia ... ..	17·9	16·0	14·8	21·3	12·7
Benha ... ..	28·8	29·6	25·6	26·4	26·5
Zagazig ... ..	25·6	27·9	26·6	22·0	24·7
Tanta ... ..	29·2	29·6	26·0	28·3	23·6
Mansûra ... ..	24·1	21·4	18·1	21·2	21·4
Shibîn el Kôm ... ..	15·5	16·1	13·3	18·7	16·2
Damanhûr ... ..	26·8	27·5	24·9	22·3	24·7
Gîza ... ..	30·5	35·6	33·0	34·6	32·5
Fayûm ... ..	32·3	40·1	32·1	32·6	33·0
Beni Suef ... ..	35·4	37·1	35·1	27·0	26·1
Minia ... ..	34·5	38·2	33·6	35·5	28·3
Assiût ... ..	29·7	33·6	27·0	29·4	28·7
Sohâg ... ..	28·6	29·0	28·6	23·4	28·3
Qena ... ..	28·2	37·1	32·7	25·6	36·9
Aswân ... ..	28·7	41·1	29·0	29·7	28·5

#### 4.—LEGISLATION.

The new legislation concerning public health administration promulgated during the year was as follows :—

*Arrêté* of June 14, 1914 : Sanitary measures for pilgrims coming from Tor.

*Arrêté* of September 5, 1914 : Modification of the list of unhealthy, inconvenient, and dangerous establishments.

Law No. 5 of 1914 : Filling-in and draining of ponds, *birkas*, and marshes.



TABLE XCVIII.—LEGISLATION.

Contraventions.

NAME OF LAW.	Cairo.	Port Said.	Suez.	Ismailia.	Damietta.	Qaliubia.	Menoufia.	Gharbia.	Dagahlia.	Sharqia.	Behaira.	Giza.	Beni Suef	Fayûm.	Minia.	Assiût.	Girga.	Qena.	Aswân.
<i>Vidange and dépotoirs. Arrêté</i> of November 8, 1886, modified by <i>Arrêté</i> of June 2, 1910 ... ..	413	156	3	—	—	6	—	16	68	1	4	—	—	3	—	1	—	—	—
Practice of medicine and its branches. <i>Arrêté</i> of June 13, 1891 ... ..	39	—	1	—	1	6	30	27	17	19	12	2	8	4	3	8	2	8	1
Vaccination. Decree of December 17, 1890, modified by Decree of August 6, 1897 ... ..	248	19	5	15	2	50	149	233	217	166	155	50	36	116	129	269	139	192	42
Enclosure of vacant lands. <i>Arrêté</i> of June 15, 1893 ...	57	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	3	—	—
CEMETERIES:—																			
Inhumation, exhumation, and transport of bodies abroad. Regulations of September 15, 1876, and March 26 and October 30, 1877 ... ..	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	2	—	—	—
Transfer of cemeteries. Decree of January 29, 1894...	—	—	—	—	—	—	—	—	—	—	3	—	—	—	—	—	—	—	—
Enclosure of cemeteries: unauthorized inhumation. Decree of March 12, 1898 ... ..	—	—	—	—	—	—	—	4	1	—	7	—	—	—	—	4	—	—	20
PROPHYLACTIC MEASURES:—																			
Decisions of Sanitary Commissions. <i>Arrêtés</i> of May 11, 1895, and December 19, 1904 ... ..	—	—	11	—	4	—	—	—	—	33	—	—	—	—	—	13	—	—	—
Oysters and shell-fish during epidemics. <i>Arrêté</i> of June 16, 1912 ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cholera. <i>Arrêté</i> of October 17, 1895, and supplementary <i>Arrêté</i> of May 30, 1896 ... ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Plague and cholera. Decree of May 27, 1899, modified by Laws No. 3 of February 16, 1911, and No. 10 of April 27, 1913 ... ..	—	—	—	—	—	—	1	1	—	—	—	—	—	2	—	2	—	—	—
Disinfection of houses during epidemics. <i>Arrêts</i> of May 23 and June 26, 1901 ... ..	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—
Passenger control in case of cholera abroad. <i>Arrêté</i> of January 21, 1911... ..	14	3	—	1	6	1	137	28	19	38	47	—	4	1	7	22	1	4	—





5.—STAFF AND PERSONNEL.

The following tables give the establishment of the present staff and personnel of the Department:—

TABLE XCIX.—PERMANENT STAFF (PENSIONABLE).

CATEGORY.	1913.	1914.	CATEGORY.	1913.	1914.
<b>Technical.</b>			<i>Brought forward</i> ...	318	316
Director-General... ..	1	1	Chief Inspector of Pharmacies... ..	1	1
Deputy Director-General ... ..	1	—	Pharmacists, 2nd class ... ..	1	1
Directors of Sections (special class)...	—	2	"    3rd    "    ... ..	5	5
"    "    "    ... ..	4	3	"    4th    "    ... ..	15	14
President Medical Commission... ..	—	1	Assistant Pharmacists ... ..	2	5
Inspector, Cairo City ... ..	—	1	Chief Veterinary Inspector ... ..	1	—
"    (special class) ... ..	1	1	Veterinary Inspector, 1st class ...	1	—
Alienists, 1st class ... ..	2	—	"    "    2nd    "    ... ..	4	—
"    2nd    "    ... ..	1	—	"    "    3rd    "    ... ..	2	1
Inspectors, Divisional ... ..	9	9	"    "    4th    "    ... ..	4	—
Sub-Director of Sections ... ..	2	2	"    "    5th    "    ... ..	11	—
Vice-President Medical Commission...	—	1	"    "    6th    "    ... ..	16	—
Inspectors, 2nd class ... ..	8	7	Chief " Inspector, Scavenging and		
"    3rd    "    ... ..	19	19	Watering Service ... ..	1	1
Inspectress ... ..	—	1	Inspectors, Scavenging and Watering		
Sanitary Engineer, 3rd class ... ..	1	1	Service ... ..	2	2
Director of Technical Institutes... ..	1	1	Assistant Inspector, Scavenging and		
Sub-Director of Technical Institutes...	1	1	Watering Service ... ..	1	1
Director Antirabic Institute ... ..	—	1	Inspector of Vidange ... ..	1	1
Bacteriologists, 1st class ... ..	—	1	<b>Clerical Staff.</b>		
"    2nd    "    ... ..	2	1	Secretary-General ... ..	1	—
"    3rd    "    ... ..	2	2	Directors of Service ... ..	1	2
Assistant Bacteriologists ... ..	2	2	Sub-Directors of Service ... ..	3	2
Chemists, 1st class ... ..	2	1	Chefs de Bureau ... ..	1	2
"    2nd    "    ... ..	—	1	Sous-Chefs de Bureau ... ..	6	6
"    3rd    "    ... ..	—	2	Employees, 1st class ... ..	8	8
Assistant Chemists ... ..	1	2	"    2nd    "    ... ..	19	19
Director, Alexandria Hospital ... ..	1	1	"    3rd    "    ... ..	34	32
Medical Officers, 1st class... ..	2	2	"    4th    "    ... ..	130	108
"    "    2nd    "    ... ..	3	4	Chief Store-keeper ... ..	1	1
"    "    3rd    "    ... ..	10	8	Store-keepers, 1st class ... ..	3	—
"    "    4th    "    { Cat. A... ..	23	23	"    2nd    "    ... ..	2	2
"    "    "    "    { "    B... ..	167	170	"    3rd    "    ... ..	3	1
Midwives ... ..	51	43	"    4th    "    ... ..	8	7
Director of Stores ... ..	1	1			
<i>Carried forward</i> ...	318	316	<b>TOTAL</b> ... ..	606	538

TABLE C.—STAFF ON CONTRACT (NON-PENSIONABLE).

CATEGORY.	1913.	1914.	CATEGORY.	1913.	1914.
Medical Officers ... ..	23	32	<i>Brought forward</i> ...	49	54
Inspectors (Epidemics) ... ..	4	5	Matrons ... ..	4	1
"    (Stores) ... ..	1	1	Nursing Sisters ... ..	24	47
Bacteriologist ... ..	1	—	Laboratory Assistants, 1st class ...	2	2
Veterinary Inspectors... ..	5	1	"    "    2nd    "    ... ..	—	1
Assistant Veterinary Inspectors ...	8	8	Clerks ... ..	151	155
Engineers ... ..	6	6			
Chief Store-keeper ... ..	1	1			
<i>Carried forward</i> ...	49	54	<b>TOTAL</b> ... ..	230	260

TABLE CI.—STAFF “HORS CADRE” OR PAID ON SPECIAL CREDITS (NON-PENSIONABLE).

CATEGORY.	1913.	1914.	CATEGORY.	1913.	1914.
Chief Attendants ... ..	93	77	<i>Brought forward</i> ...	924	734
Male „ ... ..	478	357	Overseers ... ..	16	37
Female „ ... ..	206	115	Disinfectors, 1st class ... ..	12	12
Sanitary Barbers... ..	127	165	„ 2nd „ ... ..	21	35
Electricians ... ..	3	1	Cooks ... ..	51	44
Assistant Electricians... ..	3	—	Printers ... ..	2	3
Mechanics ... ..	8	6	Other employees and artisans of		
Laboratory Assistants, 3rd class ...	5	7	various trades ... ..	1,149	989
„ „ 4th „ ...	3	6			
<i>Carried forward</i> ...	924	734	<i>TOTAL</i> ... ..	2,326	1,854

6.—BUDGET.

INTERIM BUDGET.

The ordinary Interim Budget for January, February, and March 1914 was fixed at L.E. 89,738														
Expended ... ..														„ 87,973
													Economy... ..	L.E. 1,765

TABLE CII.—SPECIAL CREDITS.

ITEM.	Balance from 1913.	Credit 3 Months, 1914.	Expended 3 Months, 1914.
	L.E.	L.E.	L.E.
Alexandria Hospital :—			
Construction and furniture ... ..	5,882	—	777
Building sisters' house ... ..	2,168	—	204
Equipment of sisters' house ... ..	200	—	—
Minia Hospital :—			
Building of out-patients' section ... ..	486	—	486
Equipment ... ..	70	—	66
Aswân Hospital :—			
Building prisoners' and lunatics' block ... ..	66	—	66
Equipment ... ..	50	—	50
Fayûm Hospital :—			
Building out-patients' section ... ..	989	—	437
Equipment ... ..	150	—	—
Infectious Diseases Hospital, Zagazig :—			
Building... ..	1,118	—	344
Equipment ... ..	59	—	—
Building quarters for Medical Officer's office and dispen- sary at Zeitia ... ..	260	—	257
Abbassia Asylum :—			
Annexes and modifications... ..	10	—	—
Building matrons' house ... ..	4	—	—
Equipment „ „ ... ..	35	—	10
Equipment for forty-five extra female patients ... ..	165	—	94
Khanka Asylum :—			
General ... ..	10	—	—
Three pavilions ... ..	3,159	—	1,700
<i>Carried forward</i> ... ..			4,491



TABLE CII.—SPECIAL CREDITS (*continued*).

ITEM.	Balance from 1913.	Credit 3 Months, 1914.	Expended 3 Months, 1914.
	L.E.	L.E.	L.E.
<i>Brought forward</i> ... ..			4,491
Khanka Asylum ( <i>continued</i> ):—			
Road ... ..	15	—	11
Milch cows ... ..	3	—	—
Workshops ... ..	80	—	68
Equipment for pavilions ... ..	720	—	201
Abbassia Infectious Diseases Hospital:—			
Annexes and modifications... ..	49	—	—
Additional works ... ..	620	—	159
Assiût General Hospital equipment ... ..	264	—	239
Qena Hospital:—			
Rebuilding ... ..	5,443	—	2,934
Equipment ... ..	794	—	—
Damietta Hospital reconstruction ... ..	10,000	—	—
Ophthalmic Hospital, Mansûra:—			
Building... ..	19	—	2
Equipment ... ..	13	—	13
Ophthalmic Hospital, Beni Suef:—			
Building... ..	59	—	58
Equipment ... ..	46	—	—
Ophthalmic Hospital, Sohâg:—			
Building ... ..	3,666	—	1,029
Equipment ... ..	331	—	36
Ophthalmic Hospital, Minia:—			
Building... ..	374	—	682
Equipment ... ..	500	—	465
Ophthalmic Hospital, Shibîn el Kôm:—			
Building... ..	2,600	—	1,658
Equipment ... ..	845	—	644
Ophthalmic Hospital, Zagazig:—			
Water installation ... ..	143	—	—
Second storey, Headquarters ... ..	120	—	—
“ ” Bacteriological Institute:—			
Building... ..	465	—	365
Equipment ... ..	1,219	—	471
Rebuilding Central Stores ... ..	127	—	—
Filing furniture for archives ... ..	40	—	38
Repair of public <i>abattoir</i> ... ..	64	—	6
Initial expenditure for new roads taken over by Cairo			
Scavenging and Watering Service ... ..	495	—	28
Filling in <i>birkas</i> ... ..	86	—	—
Transfer of cemeteries ... ..	7	270	265
Initial expenditure for gullies ... ..	760	—	199
Shellal cattle sheds ... ..	384	—	53
Prophylactic Measures Credit:—			
Cattle plague... ..	12,742	10,829	12,755
Cholera ... ..	38	2,753	2,479
Human plague ... ..	1,171	7,631	5,204
Disinfection in ports ... ..	949	2,400	3,128
Ankylostomiasis ... ..	113	1,000	901
Indemnities for cattle dead after double inoculation ... ..	37	—	37
TOTAL ... ..			38,619

TABLE CIII.—CREDITS ON GENERAL RESERVE.

ITEM.	Balance from 1913.	Credit 3 Months, 1914.	Expended 3 Months, 1914.
	L.E.	L.E.	L.E.
Cost of land for improvement of the road to Khanka Asylum	69	—	33
“ ” new hospital at Qena ... ..	25	—	—
“ ” Zagazig Infectious Hospital... ..	28	—	—
TOTAL ... ..			33

ORDINARY BUDGET.

The Budget from April 1914 to end of March 1915 was fixed at	...	...	...	L.E.	484,486 *
That for 1913 was	...	...	...		393,569 †
Showing an increase of	...	...	...		90,917
Subdivided as follows :—					L.E.
(1) Increase of personnel (pensionable)	...	...	...		9,892
(2) Increase of personnel (non-pensionable)	...	...	...		4,943
(3) Increase of hospital and general supplies and expenses	...	...	...		17,171
(4) Automatic increase in Cairo Scavenging and Watering Service	...	...	...		6,677
(5) Upkeep of buildings	...	...	...		474
(6) New works	...	...	...		51,760
					90,917

The following table indicates in a general manner the credits allotted to the individual or correlated Services of the Department, and affords a comparison with the corresponding credits :—

TABLE CIV.

	1914.	1913.
	L.E.	L.E.
A. Personnel :—		
1. Direction Central	37,115	35,864
2. Central Stores and attached Services	6,348	5,961
3. Scientific Laboratories and Institutes	13,208	10,424
4. Central Ophthalmic Office and Ophthalmic Hospitals	12,817	9,113
5. Inspectorate of Pharmacies	1,818	1,650
6. Provincial Hospitals and Inspectorates	51,397	50,895
7. Provincial Barbers	1,500	1,500
8. Cairo Inspectorate	13,742	12,954
9. Cairo Hospitals (including Lunatic Asylum)	34,435	27,954
10. Alexandria, Port Said, and Suez Hospitals	10,547	8,973
B. Equipment	42,101	37,080
C. General supplies and diets	39,907	46,701
D. Travelling charges and allowances	15,224	13,280
E. Various indemnities and allowances	7,017	5,728
F. Free water fountains	2,588	2,478
G. Prophylactic measures	4,737	4,737
H. Repairs and maintenance of buildings	8,640	8,166
I. Sanitation of Mosques	2,500	2,500
J. General expenses : salaries, forage, rent, water, light, telegrams, telephones, etc.	66,115	53,318
K. Cairo Scavenging and Watering Service	60,970	54,293
L. New works	51,760	—
TOTAL	484,486	393,569

\* Including L.E. 17,157 supplementary credits granted during the year.

† L.E. 50,423 was transferred to the Budgets of the Ministries of the Interior and Public Works for Lunacy Section Budget and L.E. 200 to Ministry of Agriculture for price of serum. The Budget at the end of the year was L.E. 433,863; the total expenditure was L.E. 363,328, showing an economy of L.E. 70,534. Special credits are added to the ordinary budget under the title "New Works."

Budget 1913	L.E. 355,337
Credits transferred from special credits for Human Plague, Serum Institute, and Cemeteries	62,250
	L.E. 417,587

To deduct :—

Transferred to the Ministry of Agriculture	L.E. 19,500
„ to other Departments for services rendered	4,518
	24,018
	L.E. 393,569



TABLE CV.—NEW WORKS.

	1914.	Expended.
	L.E.	L.E.
Alexandria Hospital :—		
Constructions and furniture ... ..	1,016	96
Sisters' house (completion) ... ..	1,928	1,323
Equipment of sisters' house ... ..	200	195
Second pavilion ... ..	9,340	1,100
Infectious Diseases Hospital (Government quote-part) ... ..	9,120	—
Equipment of new Sections* ... ..	—	101
Fayûm Hospital :—		
Out-patients' Section ... ..	513	500
Equipment... ..	150	—
Infectious Diseases Hospital, Zagazig :—		
Building ... ..	777	691
Equipment... ..	59	59
Lunatic Asylum, Khanka :—		
Equipment four pavilions ... ..	720	—
Water installation ... ..	2,677	—
Five milch cows ... ..	115	—
Qasr el 'Aini Hospital, new battery ... ..	500	9
Qena Hospital, Equipment ... ..	794	672
Ophthalmic Hospital, Sohâg, equipment ... ..	152	94
„ „ Minia „ ... ..	33	7
„ „ Shîbîn el Kôm, equipment ... ..	152	101
Damanhûr disinfection station ... ..	900	732
Initial expenses for scavenging and watering new roads ... ..	2,053	832
Filing furniture for archives ... ..	240	—
Prophylactic measures :—		
Cholera ... ..	8,300	8,134
Ankylostomiasis ... ..	12,000	6,870
Second storey, Bacteriological Institute, equipment ... ..	—	648*
Qena Hospital, cost of land ... ..	—	25*
TOTAL ... ..	51,739	22,189

\* Paid on the margin of New Works Credits.

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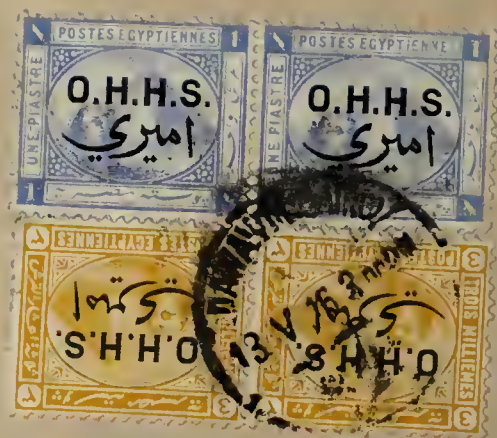
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